

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
Jim Tracy for Congress

ADDRESS (number and street) P.O. Box 332490
 Check if different than previously reported. (ACC) Murfreesboro TN 37133

2. **FEC IDENTIFICATION NUMBER** C C00540633 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
TN 04

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 TN
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
07 / 01 / 2014 through 07 / 18 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer SHANE REEVES
Signature of Treasurer SHANE REEVES *[Electronically Filed]* Date M M / D D / Y Y Y Y
07 / 26 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Jim Tracy for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 07 / 18 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	21312.90	1418782.57
(b) Total Contribution Refunds (from Line 20(d))	0.00	14300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	21312.90	1404482.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	422744.77	1100800.47
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	422744.77	1100800.47
8. Cash on Hand at Close of Reporting Period (from Line 27).....	353682.10	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	50000.00	

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 12/2003)

Write or Type Committee Name

Jim Tracy for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13702.90	1127566.90
(ii) Unitemized.....	2110.00	65667.00
(iii) TOTAL of contributions from individuals ▶	15812.90	1193233.90
(b) Political Party Committees.....	0.00	1000.00
(c) Other Political Committees (such as PACs).....	5500.00	211121.00
(d) The Candidate.....	0.00	13427.67
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	21312.90	1418782.57
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	50000.00	50000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	50000.00	50000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	71312.90	1468782.57

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	422744.77	1100800.47
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	0.00	5750.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8550.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	14300.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	422744.77	1115100.47

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	705113.97
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	71312.90
25. SUBTOTAL (add Line 23 and Line 24).....	776426.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	422744.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	353682.10

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
BRADLEY SCOTT ABERNATHY

Mailing Address 1503 N HIGHLAND AVE.

City MURFREESBORO State TN Zip Code 37130-2204

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

Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
07 / 16 / 2014

Transaction ID : SA11.2436

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ANTHONY ADAMS

Mailing Address 3851 MURFREESBORO ROAD

City READYVILLE State TN Zip Code 37149-5036

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

Name of Employer SELF EMPLOYED Occupation EXCAVATION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
07 / 03 / 2014

Transaction ID : SA11.2414

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DANIEL J. ALCORN

Mailing Address 5538 HAMPDEN AVE.

City ROCKVALE State TN Zip Code 37153-4437

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

Name of Employer SELF-EMPLOYED Occupation REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
07 / 16 / 2014

Transaction ID : SA11.2410

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
ANNE F. BATEY

Mailing Address **2802 E MAIN STREET**

City **MURFREESBORO** State **TN** Zip Code **37127-4155**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11.2485

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TEB BATEY

Mailing Address **10137 HALLS HILL PIKE**

City **MILTON** State **TN** Zip Code **37118-4518**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11.2497

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAUL BINKLEY

Mailing Address **104 ST. MICHAELS LN.**

City **SMYRNA** State **TN** Zip Code **37167-6322**

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

Name of Employer **TN FARMERS COOP.** Occupation **SALES MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11.2473

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

600.00

**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 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
TRACEY A. BINKLEY

Mailing Address 237 FOUNDRY CIR.

City MURFREESBORO State TN Zip Code 37128-5147

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

Name of Employer THE BURNS AND BINKLEY GROUP AT MORC Occupation ASSOCIATE VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2444

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS E. BURGESS

Mailing Address 8333 PANTHER CREEK RD.

City CHRISTIANA State TN Zip Code 37037-5144

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

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2439

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DENNIS D. CAVIN

Mailing Address 1167 PLANTATION PASS

City GALLATIN State TN Zip Code 37066

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2500

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

850.00

**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 8 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
ERIC N. CLEMENTS

Mailing Address **918 TRAILSTAR CT.**

City **MURFREESBORO** State **TN** Zip Code **37130-3364**

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

Name of Employer **MATLOCK CLEMENTS** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 16 / 2014

Transaction ID : SA11.2452

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL COFFEY

Mailing Address **P.O. BOX 1800**

City **SHELBYVILLE** State **TN** Zip Code **37162-1800**

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

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

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

Transaction ID : SA11.2293

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CHRISTY COFFEY

Mailing Address **P.O. BOX 1800**

City **SHELBYVILLE** State **TN** Zip Code **37162-1800**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.2432

Amount of Each Receipt this Period
2400.00
 CONTRIBUTION
[MEMO ITEM]
 REATTRIBUTION FROM SPOUSE

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
MICHAEL COFFEY

Mailing Address P.O. BOX 1800

City State Zip Code
SHELBYVILLE TN 37162-1800

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

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : SA11.2433

Amount of Each Receipt this Period
-2400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

B. Full Name (Last, First, Middle Initial)
RANDAL L. DELBRIDGE

Mailing Address 4935 FERRELL HOLLOW RD.

City State Zip Code
READYVILLE TN 37149-4886

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

Name of Employer Occupation
STATE OF TENNESSEE FACILITIES CONSTRUCTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11.2462

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRED DETTWILLER

Mailing Address 301 GREAT CIRCLE RD.

City State Zip Code
NASHVILLE TN 37228-1703

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

Name of Employer Occupation
DET DISTRIBUTING PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

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

Transaction ID : SA11.2159

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

[MEMO ITEM]

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

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

50.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
FRED DETTWILLER

Mailing Address 301 GREAT CIRCLE RD.

City: NASHVILLE State: TN Zip Code: 37228-1703

FEC ID number of contributing federal political committee: C

Name of Employer: DET DISTRIBUTING Occupation: PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 07 / 02 / 2014

Transaction ID : SA11.2399

Amount of Each Receipt this Period: -400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

B. Full Name (Last, First, Middle Initial)
KATHRYN DETTWILLER

Mailing Address 108 SAVOY CIR.

City: NASHVILLE State: TN Zip Code: 37205

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED Occupation: ARTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 07 / 02 / 2014

Transaction ID : SA11.2398

Amount of Each Receipt this Period: 400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

C. Full Name (Last, First, Middle Initial)
CAROLYN L. DEWITT

Mailing Address 219 HAYNES HAVEN LN.

City: MURFREESBORO State: TN Zip Code: 37129-1564

FEC ID number of contributing federal political committee: C

Name of Employer: N/A Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 375.00

Date of Receipt: 07 / 18 / 2014

Transaction ID : SA11.2474

Amount of Each Receipt this Period: 125.00

CONTRIBUTION

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

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

125.00

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

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

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
LANCE FRIZZELL

Mailing Address 1610 SHAGBARK TRL.

City MURFREESBORO State TN Zip Code 37130-1128

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

Name of Employer STATE OF TENNESSEE Occupation CHIEF OF STAFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2487

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL B. GRAY

Mailing Address 99 NORTHFIELD DRIVE

City WINCHESTER State TN Zip Code 37398-6425

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

Name of Employer SAIC Occupation SVP OF FINANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 05 / 2014

Transaction ID : SA11.2416

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JACK R. HICKS

Mailing Address 3415 MEADOWCREST DRIVE

City MURFREESBORO State TN Zip Code 37129-0836

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

Name of Employer BELMONT UNIVERSITY Occupation PROFESSOR/ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
675.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2437

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

600.00

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

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

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
MR. DAVID A. HOKE

Mailing Address 721 STONE MILL CIRCLE

City MURFREESBORO State TN Zip Code 37130-1490

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

Name of Employer VIABRAND GROUP Occupation MARKETING CONSULTING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 04 / 2014

Transaction ID : SA11.2415

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM H. HUDDLESTON IV

Mailing Address 245 FANNING BEND DR.

City WINCHESTER State TN Zip Code 37398-3987

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

Name of Employer HUDDLESTON-STEELE ENGINEERING, INC. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2441

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KAREN W. HUDSON

Mailing Address 2010 STRATFORD RD.

City MURFREESBORO State TN Zip Code 37129-1336

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2470

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

600.00

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

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

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
LISA H. JACKSON

Mailing Address 1069 COCHRAN LN.

City State Zip Code
LEWISBURG TN 37091-4339

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

Name of Employer Occupation
LEWISBURG ECONOMIC ALLIANCE MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2014

Transaction ID : SA11.2443

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. NATHAN R. JAMES

Mailing Address 4022 LAKE COURT

City State Zip Code
ZACHARY LA 70791-7310

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

Name of Employer Occupation
LOUISIANA GOVERNOR'S OFC POLICY ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 12 / 2014

Transaction ID : SA11.2421

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FRANK JENNINGS

Mailing Address 706 SARATOGA DR.

City State Zip Code
MURFREESBORO TN 37130-5609

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2014

Transaction ID : SA11.2438

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
JAMES WINSTON JONES JR.

Mailing Address 1626 WEXFORD DR.

City MURFREESBORO State TN Zip Code 37129-5846

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

Name of Employer QUALITY FURNITURE COMPANY, INC. Occupation BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : SA11.2408

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KAREN B. JONES

Mailing Address 3488 ARMSTRONG VALLEY RD.

City MURFREESBORO State TN Zip Code 37128

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

Name of Employer JONES FINANCIAL, LLC Occupation SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2488

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KATHY JONES

Mailing Address 2806 WINDSONG PL.

City MURFREESBORO State TN Zip Code 37129-6558

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

Name of Employer MTSU Occupation ACADEMIC ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2450

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 15 OF 40
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
HENRY B. KIRBY

Mailing Address 3442 AUTUMN OAKS CT.

City MURFREESBORO State TN Zip Code 37129

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2501

Amount of Each Receipt this Period
 _____ 400.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HERBERT LACKEY

Mailing Address 281 BANCROFT RD.

City MC DONALD State TN Zip Code 37353-7000

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2457

Amount of Each Receipt this Period
 _____ 300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LEBRON LACKEY

Mailing Address 230 WYLOU DR.

City CHARLESTON State TN Zip Code 37310-5179

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

Name of Employer CRA Occupation RADIOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2014

Transaction ID : SA11.2407

Amount of Each Receipt this Period
 _____ 400.00
 CONTRIBUTION

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

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

_____ 1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
THOMAS F. LITTLE

Mailing Address 8093 RHODES LN.

City LASCASSAS State TN Zip Code 37085-4425

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

Name of Employer GLAXO SMITH KLINE Occupation CONTRACTING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2454

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRED R. LOVELACE

Mailing Address P.O. BOX 776

City MURFREESBORO State TN Zip Code 37133-0776

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2489

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SHELLY MOLITOR

Mailing Address 310 DEERVIEW LN.

City WOODBURY State TN Zip Code 37190-7110

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2471

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
KATHY NOBLES

Mailing Address 1447 AVELLINO CIR.

City MURFREESBORO State TN Zip Code 37130-7601

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

Name of Employer HOOVER, INC. Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2493

Amount of Each Receipt this Period
 CONTRIBUTION **250.00**

B. Full Name (Last, First, Middle Initial)
DAVID PARSONS

Mailing Address 1529 AVELLINO CIR.

City MURFREESBORO State TN Zip Code 37130-7610

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

Name of Employer BOB PARKS REALTY Occupation REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2442

Amount of Each Receipt this Period
 CONTRIBUTION **250.00**

C. Full Name (Last, First, Middle Initial)
DONALD L. REEVES JR.

Mailing Address 866 BAKER RD.

City COLUMBIA State TN Zip Code 38401-5558

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

Name of Employer TENNESSEE PERSONAL PROTECTION Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2455

Amount of Each Receipt this Period
 CONTRIBUTION **500.00**

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
DANIEL J. ROBBINS

Mailing Address 501 MEADOWLARK DR.

City State Zip Code
SHELBYVILLE TN 37160-5410

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

Name of Employer Occupation
ROBBINS SECURITY SYSTEM OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11.2491

Amount of Each Receipt this Period
200.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RUBLE SANDERSON

Mailing Address 415 CHURCH ST, APT 3015

City State Zip Code
NASHVILLE TN 37219-1849

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

Name of Employer Occupation
SELF-EMPLOYED BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

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

Transaction ID : SA11.2375

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BRENDA SANDERSON

Mailing Address 415 CHURCH ST, APT 3015

City State Zip Code
NASHVILLE TN 37219-1849

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

Name of Employer Occupation
BROADWAY ENTERTAINMENT OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : SA11.2380

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

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

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

200.00

**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 19 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
ANGELYN JENKINS SMITH

Mailing Address 1280 MIDDLE TENNESSEE BLVD, #C-11

City	State	Zip Code
MURFREESBORO	TN	37130-0925

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

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 225.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2445

Amount of Each Receipt this Period
 _____ 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DOROTHY TAYLOR

Mailing Address 1434 AUXBURY PL.

City	State	Zip Code
MURFREESBORO	TN	37129-1772

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

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2409

Amount of Each Receipt this Period
 _____ 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JAMES THOMPSON

Mailing Address 14136 MT. PLEASANT RD.

City	State	Zip Code
ROCKVALE	TN	37153-4631

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

Name of Employer THOMPSON STORAGE	Occupation BUSINESS OWNER
--------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2453

Amount of Each Receipt this Period
 _____ 1000.00
 CONTRIBUTION

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

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

_____ 1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
MR. JOE L. TODD

Mailing Address 1100 SEVEN OAKS BLVD.

City SMYRNA	State TN	Zip Code 37167
----------------	-------------	-------------------

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

Name of Employer TNARNG	Occupation AIRCRAFT SCHEDULER
----------------------------	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11.2412

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOE L. TODD

Mailing Address 1100 SEVEN OAKS BLVD.

City SMYRNA	State TN	Zip Code 37167
----------------	-------------	-------------------

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

Name of Employer TNARNG	Occupation AIRCRAFT SCHEDULER
----------------------------	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2472

Amount of Each Receipt this Period
 125.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MIKE WALLER

Mailing Address 110 SUGAR CREEK LN.

City SMYRNA	State TN	Zip Code 37167-2334
----------------	-------------	------------------------

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

Name of Employer REED & WALLER	Occupation MANAGING PARTNER
-----------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2411

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

625.00

**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 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
JAMES C. WARD III

Mailing Address 1209 NICHOL LANE

City State Zip Code
NASHVILLE TN 37205-4419

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

Name of Employer Occupation
THE CRICHTON GROUP INSURANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

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

Transaction ID : SA11.2192

Amount of Each Receipt this Period
500.00

CONTRIBUTION

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CORINNE WARD

Mailing Address 1209 NICHOL LN.

City State Zip Code
NASHVILLE TN 37205-4419

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

Name of Employer Occupation
N/A HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2014

Transaction ID : SA11.2405

Amount of Each Receipt this Period
400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION FROM SPOUSE

C. Full Name (Last, First, Middle Initial)
JAMES C. WARD III

Mailing Address 1209 NICHOL LANE

City State Zip Code
NASHVILLE TN 37205-4419

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

Name of Employer Occupation
THE CRICHTON GROUP INSURANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2014

Transaction ID : SA11.2406

Amount of Each Receipt this Period
-400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION TO SPOUSE

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
GINNY OLERUD WILLIAMS

Mailing Address 415 NISSAN DR.

City State Zip Code
SMYRNA TN 37167-4303

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

Name of Employer Occupation
GIL'S ACE HARDWARE OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2014

Transaction ID : SA11.2440

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. COLEMAN R. WOMACK

Mailing Address 3904 HENRICKS HILL DRIVE

City State Zip Code
SMYRNA TN 37167-8369

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

Name of Employer Occupation
METRO NASHVILLE POLICE DEPT POLICE OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11.2419

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. COLEMAN R. WOMACK

Mailing Address 3904 HENRICKS HILL DRIVE

City State Zip Code
SMYRNA TN 37167-8369

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

Name of Employer Occupation
METRO NASHVILLE POLICE DEPT POLICE OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11.2420

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
MR. COLEMAN R. WOMACK

Mailing Address 3904 HENRICKS HILL DRIVE

City State Zip Code
SMYRNA TN 37167-8369

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

Name of Employer Occupation
METRO NASHVILLE POLICE DEPT POLICE OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : SA11.2422

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DONALD M. WRIGHT

Mailing Address 2709 JIM HOUSTON CT.

City State Zip Code
MURFREESBORO TN 37129-5146

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

Name of Employer Occupation
SELF-EMPLOYED ADVERTISING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11.2468

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MURFREESBORO PURE MILK CO.

Mailing Address PO BOX 1526

City State Zip Code
MURFREESBORO TN 37133-1526

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
202.90

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 02 / 2014

Transaction ID : SA11.2459

Amount of Each Receipt this Period
202.90
CONTRIBUTION

IN KIND-FOOD/BEVERAGE

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

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

302.90

13702.90

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

Form/Schedule: SA11AI

Transaction ID : SA11.2459

PARTNERSHIP ATTRIBUTION REQUESTED

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
COMMUNITY HEALTH SYSTEMS PROFESSIONAL SERVICES CORP. PAC

Mailing Address 4000 MERIDIAN

City FRANKLIN State TN Zip Code 37067-6325

FEC ID number of contributing federal political committee. **C C00485896**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2449

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. 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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2446

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address PO BOX 66338

City BATON ROUGE State LA Zip Code 70896-6338

FEC ID number of contributing federal political committee. **C C00174599**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2456

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
OUTDOOR ADVERTISING- ASSOC. OF AMERICA PAC

Mailing Address 1850 M STREET NW, #1040

City WASHINGTON State DC Zip Code 20036-5821

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2451

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 235 EAST 42ND STREET

City NEW YORK State NY Zip Code 10017-5703

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11.2448

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

3000.00

5500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 27 OF 40		
<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

A. Full Name (Last, First, Middle Initial)
JIM TRACY

Mailing Address **PO BOX 332490**

City **MURFREESBORO** State **TN** Zip Code **37133**

FEC ID number of contributing federal political committee. **C H0TN06240**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
63147.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
07		03		2014

Transaction ID : SA13.1300000

Amount of Each Receipt this Period

50000.00

CANDIDATE LOAN FROM PERSONAL FUNDS

CANDIDATE LOAN FROM PERSONAL FUNDS

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

Amount of Each Receipt this Period

--

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

Amount of Each Receipt this Period

--

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

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

50000.00
50000.00

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

Form/Schedule: SA13A

Transaction ID : SA13.1300000

CANDIDATE LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID:

**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 40			
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial) A. DUNCAN BRYANT		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 2330 QUAIL RIDGE		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.1000
City ATHENS	State TN	
Zip Code 37303	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. JOHN HOLT EDWARDS		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 5823 GARDEN OAK COVE		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.1010
City MEMPHIS	State TN	
Zip Code 38120	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. STEPHANIE JARNAGIN		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 200 11TH AVE NORTH APT 213		Amount of Each Disbursement this Period 4500.00 Transaction ID : SB17.1001
City NASHVILLE	State TN	
Zip Code 37203	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7000.00
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 30 OF 40	
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial) A. JACOB LOVELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 178 BRAKEBELL ROAD		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.1009
City KNOXVILLE State TN Zip Code 37924	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LAWRENCE WILSON RICHARDSON		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1711 BRIGHTON DR		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.1007
City MURFREESBORO State TN Zip Code 37130	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MIKE ROBINSON		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 116 O'HARA LN		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.1006
City JACKSON State TN Zip Code 38305	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4500.00
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 31 OF 40			
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial) A. CAMERON RUSH		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 301 RICHMOND HEIGHTS RD		Amount of Each Disbursement this Period 3000.00
City BRISTOL	State TN	
Zip Code 37620	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Transaction ID : SB17.1008
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MATTHEW RUSSELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 4638 BROWN LEAF DR		Amount of Each Disbursement this Period 3500.00
City OLD HICKORY	State TN	
Zip Code 37138	Purpose of Disbursement POLITICAL STRATEGY CONSULTING	Transaction ID : SB17.1005
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AIRNET GROUP INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address PO BOX 11181		Amount of Each Disbursement this Period 996.70
City CHATTANOOGA	State TN	
Zip Code 37401	Purpose of Disbursement TELEPHONE SERVICE	Transaction ID : SB17.1018
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7496.70
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 32 OF 40		
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 5555 HILTON AVE STE 106		Amount of Each Disbursement this Period 525.08 Transaction ID : SB17.1037
City BATON ROUGE	State LA	
Zip Code 70808	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BELL MEDIA		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 299 QUEEN ST. W		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.1002
City TORONTO	State ON	
Zip Code M4P 1	Purpose of Disbursement MEDIA	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BRADLEY COUNTY GOP		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 2163 APD-40		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.1020
City CLEVELAND	State TN	
Zip Code 37323	Purpose of Disbursement REGISTRATION FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	875.08
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 33 OF 40			
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial)

A. CHARTER COMMUNICATIONS

Mailing Address 12405 POWERSCOURT DR, STE 100

City ST. LOUIS State MO Zip Code 63131

Purpose of Disbursement TELEPHONE SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 241.25

Transaction ID : SB17.1027

Category/Type

Full Name (Last, First, Middle Initial)

B. CLEVELAND DAILY BANNER

Mailing Address PO BOX 3600

City CLEVELAND State TN Zip Code 37320

Purpose of Disbursement MEDIA

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 285.00

Transaction ID : SB17.1028

Category/Type

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 02 / 2014

Amount of Each Disbursement this Period: 798.00

Transaction ID : SB17.1003

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1324.25

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 34 OF 40	
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial) A. COMPLIANCE CONSULTING COMPANY OF VA LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address PO BOX 365		Amount of Each Disbursement this Period 1525.00
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement COMPLIANCE CONSULTING	Transaction ID : SB17.1017
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address THREE GALLERIA TOWER 13155 NOEL RD		Amount of Each Disbursement this Period 37.87
City DALLAS	State TX	
Zip Code 75240	Purpose of Disbursement PRINTING	Transaction ID : SB17.1035
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FLS CONNECT LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 7300 HUDSON BLVD STE 270		Amount of Each Disbursement this Period 250.00
City ST PAUL	State MN	
Zip Code 55128	Purpose of Disbursement TELEPHONE SERVICE	Transaction ID : SB17.1019
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1812.87
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 35 OF 40	
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial) A. FLS CONNECT LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 7300 HUDSON BLVD STE 270		Amount of Each Disbursement this Period 687.00
City ST PAUL State MN Zip Code 55128	Purpose of Disbursement TELEPHONE SERVICE	
Candidate Name	Category/Type	Transaction ID : SB17.1026
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. FOLEY & LARDNER LLP		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 3000 K STREET NW STE 600		Amount of Each Disbursement this Period 2138.55
City WASHINGTON State DC Zip Code 20007	Purpose of Disbursement LEGAL CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.1015
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) C. HARRIS MEDIA LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 611 S CONGRESS AVE STE 400		Amount of Each Disbursement this Period 20496.81
City AUSTIN State TX Zip Code 78704	Purpose of Disbursement WEB SERVICE	
Candidate Name	Category/Type	Transaction ID : SB17.1016
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	23322.36
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 40	
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial) A. ICONTACT CORPORATION		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 2450 PERIMETER PARK DR STE 105		Amount of Each Disbursement this Period 92.50
City MORRISVILLE State NC Zip Code 27560	Purpose of Disbursement WEB SERVICE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.1004
State: District:		

Full Name (Last, First, Middle Initial) B. JOYNER & HOGAN PRINTERS		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 600 MAIN ST PO BOX 60069		Amount of Each Disbursement this Period 437.00
City NASHVILLE State TN Zip Code 37206	Purpose of Disbursement PRINTING/POSTAGE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.1022
State: District:		

Full Name (Last, First, Middle Initial) C. MAJORITY STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 135 PROFESSIONAL DR STE 104		Amount of Each Disbursement this Period 48583.90
City PONTE VEDRA BEACH State FL Zip Code 32082	Purpose of Disbursement PRINTING/POSTAGE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.1014
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	49113.40
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 37 OF 40	
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial) A. MURFREESBOTO PURE MILK CO		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO BOX 1526		Amount of Each Disbursement this Period 202.90
City MURFREESBORO	State TN Zip Code 37133	
Purpose of Disbursement IN-KIND - FOOD/BEVERAGE	Candidate Name	Transaction ID : SB.13000000
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	IN-KIND - FOOD/BEVERAGE

Full Name (Last, First, Middle Initial) B. ONMESSAGE INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 705 MELVIN AVE #105		Amount of Each Disbursement this Period 83802.00
City ANNAPOLIS	State MD Zip Code 21401	
Purpose of Disbursement MEDIA	Candidate Name	Transaction ID : SB17.1011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. ONMESSAGE INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 705 MELVIN AVE #105		Amount of Each Disbursement this Period 103056.00
City ANNAPOLIS	State MD Zip Code 21401	
Purpose of Disbursement MEDIA	Candidate Name	Transaction ID : SB17.1021
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	187060.90
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 38 OF 40	
	<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)
Jim Tracy for Congress

Full Name (Last, First, Middle Initial) A. ONMESSAGE INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 705 MELVIN AVE #105		Amount of Each Disbursement this Period 139489.00 Transaction ID : SB17.1034
City ANNAPOLIS	State MD	
Zip Code 21401	Purpose of Disbursement MEDIA	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PANERA BREAD		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 3630 S GEYER RD #100		Amount of Each Disbursement this Period 79.46 Transaction ID : SB17.1023
City ST LOUIS	State MO	
Zip Code 63127	Purpose of Disbursement CATERING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 10.75 Transaction ID : SB17.1013
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	139579.21
TOTAL This Period (last page this line number only).....	422084.77

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Jim Tracy for Congress

Transaction ID : **SC.10**

LOAN SOURCE Full Name (Last, First, Middle Initial)
JIM TRACY

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 332490

City State ZIP Code
MURFREESBORO TN 37133

CANDIDATE LOAN FROM PERSONAL FUNDS

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS

Date Incurred: M 07 / D 03 / Y 2014
 Date Due: M M / D D / ON DEMAND
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	50000.00
TOTALS This Period (last page in this line only).....	50000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

Form/Schedule: SC/10

Transaction ID : SC.10

CANDIDATE LOAN FROM PERSONAL FUNDS

Form/Schedule:

Transaction ID: