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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

AUTOZONE COMMITTEE FOR BETTER GOVERNMENT

ADDRESS (number and street) ▼ PO BOX 2198

☐ Check if different than previously reported. (ACC)

MEMPHIS TN 38103-

CITY ▲ STATE ▲ ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼ C00233056

3. IS THIS REPORT ☑ NEW (N) OR ☐ AMENDED (A)

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)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)	☐ May 20 (M5)	☐ Aug 20 (M8)	☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3)	☐ Jun 20 (M6)	☐ Sep 20 (M9)	☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4)	☐ Jul 20 (M7)	☐ Oct 20 (M10)	☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on ___ / ___ / ___ In the State of ___

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on ___ / ___ / ___ In the State of ___

5. Covering Period 07 / 01 / 2001 through 09 / 30 / 2001

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 Donald R. Rawlins

Signature of Treasurer [signature] Date 10 / 04 / 2001

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

Office Use Only							

FEC FORM 3X (Revised 1/01)

FE1AN042

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name
AUTOZONE COMMITTEE FOR BETTER GOVERNMENT

Report Covering the Period: From: 01 01 2001 To: 09 30 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2001		922533
(b) Cash on Hand at Beginning of Reporting Period	1457175	
(c) Total Receipts (from Line 19)	883889	2738530
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2341063	3661063
7. Total Disbursements (from Line 30)	1100000	2520000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1241063	1241063
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Revised 1/01)

Write or Type Committee Name
AUTOZONE COMMITTEE FOR BETTER GOVERNMENT

Report Covering the Period: From: 07 01 2001 To: 09 30 2001

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	53844	
(ii) Unitemized	830044	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	883888	2738530
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) ▶	883888	2738530
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	883888	2738530
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	883888	2738530

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	1000000	17000000
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements	400000	720000
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 29(d), and 29) ▶	11000000	24200000
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	11000000	24200000

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)		
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)		
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☑ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)
AUTOZONE COMMITTEE FOR BETTER GOVERNMENT

A.
Full Name (Last, First, Middle Initial): Adams Jr Johnston C
Mailing Address: 4315 Lockshoe
City: Memphis State: TN Zip Code: 38117
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 153840
Date of Receipt: 09 / 30 / 2001
Amount of Each Receipt this Period: 538.44

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) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: / /
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) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: / /
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 538.44

TOTAL This Period (last page this line number only) ▶ 538.44

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☑ 23 ☐ 24 ☐ 26
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE | OF

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NAME OF COMMITTEE (In Full): AUTOZONE COMMITTEE FOR BETTER GOVERNMENT

A.
Full Name (Last, First, Middle Initial): Shelby For U.S. Senate
Mailing Address: P.O. Box 1091
City: Tuscaloosa State: AL Zip Code: 35403
Purpose of Disbursement: U.S. Senate
Candidate Name: Shelby
Category/Type: 003
Office Sought: ☐ House ☑ Senate ☐ President
State: AL District:
Disbursement For: ☑ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 04 / 2001
Amount of Each Disbursement this Period: 100,000

B.
Full Name (Last, First, Middle Initial): Ed Bryant for Congress
Mailing Address: P.O. Box 1961
City: Cordova State: TN. Zip Code: 38088-1961
Purpose of Disbursement: U.S. House of Representatives
Candidate Name: Ed Bryant
Category/Type: 003
Office Sought: ☑ House ☐ Senate ☐ President
State: TN District: 7
Disbursement For: ☑ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 04 / 2001
Amount of Each Disbursement this Period: 500,000

C.
Full Name (Last, First, Middle Initial): Harold Ford Jr. for Congress
Mailing Address: 130 North Court Ave.
City: Mphs State: TN. Zip Code: 38103
Purpose of Disbursement: U.S. House of Representatives
Candidate Name: Harold Ford Jr.
Category/Type: 003
Office Sought: ☑ House ☐ Senate ☐ President
State: TN. District: 9
Disbursement For: ☑ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 04 / 2001
Amount of Each Disbursement this Period: 100,000

SUBTOTAL of Disbursements This Page (optional) ▶ 700,000

TOTAL This Period (last page this line number only) ▶ 700,000

FEC Schedule B (Form 3X) (Revised 1/01)

FE1AH042

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☑ 29

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NAME OF COMMITTEE (In Full)
AUTOZONE COMMITTEE FOR BETTER GOVERNMENT

A.
Full Name (Last, First, Middle Initial): Shelby County Republican Women
Mailing Address: 4555 Poplar Suite 520
City: Memphis State: TN Zip Code: 38117
Purpose of Disbursement: Annual Fundraiser
Candidate Name:
Category/Type: 003
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 07 / 26 / 2001
Amount of Each Disbursement this Period: 75000

B.
Full Name (Last, First, Middle Initial): Committee to Elect Paul Stanley
Mailing Address: 751 Nashoba
City: Germantown State: TN Zip Code: 38138
Purpose of Disbursement: Tennessee State Representatives
Candidate Name:
Category/Type: 003
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☑ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 09 / 18 / 2001
Amount of Each Disbursement this Period: 250.00

C.
Full Name (Last, First, Middle Initial): Tennessee Republican Party
Mailing Address: 1922 West End Avenue
City: Nashville State: TN Zip Code: 37203
Purpose of Disbursement: Statesmen Dinner
Candidate Name:
Category/Type: 003
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 09 / 24 / 2001
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☑ 29

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NAME OF COMMITTEE (In Full)
AUTOZONE COMMITTEE FOR BETTER GOVERNMENT

A.
Full Name (Last, First, Middle Initial): Van Hilleary for Governor
Mailing Address: P.O. Box 680127
City: Franklin State: TN. Zip Code: 37068-0127
Purpose of Disbursement: Tennessee Governor
Candidate Name:
Category/Type: 003
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 09 / 2001
Amount of Each Disbursement this Period: 1,000.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: MM / DD / YYYY
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: MM / DD / YYYY
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 1,000.00

TOTAL This Period (last page this line number only) ▶ 4,000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☑ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE 1 OF 1

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NAME OF COMMITTEE (In Full): AUTOZONE COMMITTEE FOR BETTER GOVERNMENT

A.
Full Name (Last, First, Middle Initial): Capito For Congress
Mailing Address: P.O. Box 11519
City: Charleston State: W.V. Zip Code: 25339
Purpose of Disbursement: U.S. House of Representative Debt Retirement
Candidate Name: Shelly Capito
Office Sought: ☑ House ☐ Senate ☐ President
State: WV District: 2
Disbursement For: ☐ Primary ☑ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 07 / 22 / 2001
Amount of Each Disbursement this Period: 500.00
Memo: Originally reported in Apr. 2001. Redesignated to 2000 General Election

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: / /
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: / /
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶
TOTAL This Period (last page this line number only) ▶ 500.00

FEC Schedule B (Form 3X) (Revised 1/01)

FE1ANDR2

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☑	Hand Delivered	Date of Receipt 10-5-01
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER	10-5-01 DATE PREPARED

(6/2000)