

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED

2013 JUL 25 AM 8:56
Office Use Only

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

NORTHEAST TENNESSEE DEMOCRATIC RESOURCE CENTER

ADDRESS (number and street) THE COLONIAL CENTER
2250 NORTH ROAD STREET
JOHNSON CITY TN 37601

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00428706

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

4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:			
	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election Report for the:		Primary (12P)	General (12G)
October 15 Quarterly Report (Q3)	Convention (12C)		Special (12S)	Runoff (12R)
January 31 Year-End Report (YE)	Election on		in the State of	
X July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:		General (30G)	Runoff (30R)
Termination Report (TER)	Election on		in the State of	

5. Covering Period 01' 01' 2013 through 06' 30' 2013

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 James W. Jones

Signature of Treasurer James W. Jones, CPA Date 07' 15' 2013

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

13031100225

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Northeast Tennessee Democrat Resource Center

Report Covering the Period: From: ^M0^M1' ^D0^D1' ^Y2^Y0^Y1^Y3 To: ^M0^M6' ^D3^D0' ^Y2^Y0^Y1^Y3

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, ^Y 2 ^Y 0 ^Y 1 ^Y 3	,	1,571.08
(b) Cash on Hand at Beginning of Reporting Period.....	,	1,571.08
(c) Total Receipts (from Line 19).....	,	17,197.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	,	18,768.08
<hr/>		
7. Total Disbursements (from Line 31).....	,	17,448.34
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	,	1,319.74
<hr/>		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	,	-
<hr/>		
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

13031100226

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Northeast Tennessee Democrat Resource Center

Report Covering the Period: From: *01^M 01^M 2013^Y* To: *06^M 30^D 2013^Y*

13031100227

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).....	9,384.00	9,384.00
(ii) Unitemized.....	7,813.00	7,813.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	17,197.00	17,197.00
(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 33, page 5).....▶	17,197.00	17,197.00
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 37, page 5).....	-	-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	-	-
17. Other Federal Receipts (Dividends, Interest, etc.).....	-	-
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	-	-
(b) Levin Funds (from Schedule H5).....	-	-
(c) Total Transfers (add 18(a) and 18(b))..	-	-
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	17,197.00	17,197.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17,197.00	17,197.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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))	,	,
	17,448.34	17,448.34
22. Transfers to Affiliated/Other Party Committees.....	,	,
28. Contributions to Federal Candidates/Committees and Other Political Committees.....	,	,
24. Independent Expenditures (use Schedule E)	,	,
25. Coordinated Party Expenditures (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	,	,
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	,	,
(ii) "Levin" Share.....	,	,
(b) Federal Election Activity Paid Entirely With Federal Funds	,	,
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	,	,
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	,	,
	17,448.34	17,448.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	,	,
	17,448.34	17,448.34

13031100228

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	, 17,197.00	, 17,197.00
34. Total Contribution Refunds (from Line 28(d))	, , .	, , .
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 17,197.00	, 17,197.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	, 17,448.34	, 17,448.34
37. Offsets to Operating Expenditures (from Line 15, page 3)	, , .	, , .
38. Net Operating Expenditures (subtract Line 37 from Line 36)	, 17,448.34	, 17,448.34

13031100229

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)		PAGE 1 OF 9					
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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)
Northeast Tennessee Democratic Resource Center

A. Full Name (Last, First, Middle Initial)
Hinkle, Barry

Mailing Address
387 Bealand Dr.

City *Bluff City* State *TN* Zip Code *37618*

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

Name of Employer *USPS* Occupation *Postal Worker*

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date *250.00*

Date of Receipt
01 ' 22 ' 2013

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Carter County Chp. TN Fed. of Democratic Women

Mailing Address
Elizabethton

City *Elizabethton* State *TN* 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 *175.00*

Date of Receipt
02 ' 04 ' 2013

Amount of Each Receipt this Period
175.00

C. Full Name (Last, First, Middle Initial)
Carter County Democratic Party

Mailing Address
Elizabethton

City *Elizabethton* State *TN* 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
01 ' 11 ' 2013

Amount of Each Receipt this Period
1000.00

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

13031100230

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

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

FOR LINE NUMBER: PAGE 2 OF 9
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Northeast Tennessee Democrat Resource Center

A. Von Cannon Charles
 Full Name (Last, First, Middle Initial)
 Mailing Address
198 Von Cannon Dr.
 City Tolson City State TD Zip Code 37601
 Name of Employer - Retired Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1,700.00
 Date of Receipt
 M M ' D D ' Y Y Y Y
06 03 ' 2013
 Amount of Each Receipt this Period
 , 170.00

B. Democratic Women's Club of Sullivan County
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City Knoxport State TD Zip Code
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1,000.00
 Date of Receipt
 M M ' D D ' Y Y Y Y
02 26 ' 2013
 Amount of Each Receipt this Period
 , 1,000.00

C. Wilson, Freda T.
 Full Name (Last, First, Middle Initial)
 Mailing Address
316 W. Chilhowie St.
 City Tolson City State TD Zip Code 37604
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1,750.00
 Date of Receipt
 M M ' D D ' Y Y Y Y
01 22 ' 2013
 Amount of Each Receipt this Period
 , 175.00

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

13031100231

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

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

FOR LINE NUMBER: PAGE 3 OF 9
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Northeast Tennessee Democrat Resource Center

Full Name (Last, First, Middle Initial)
A. Wells, Billy

Mailing Address
P.O. Box 161

City Bluff City State TN Zip Code 37618

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Printer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
, , 375.00

Date of Receipt
M M ' D D ' Y Y Y Y
01 23 2013

Amount of Each Receipt this Period
, , 375.00

Full Name (Last, First, Middle Initial)
B. McKamey, William H.

Mailing Address
235 Black Rock Road

City Pearcy Flats State TN Zip Code 37136

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
, , 425.00

Date of Receipt
M M ' D D ' Y Y Y Y
06 03 2013

Amount of Each Receipt this Period
, , 425.00

Full Name (Last, First, Middle Initial)
C. Dotson, Roger B.

Mailing Address
221 Trace Court

City Kingsport State TN Zip Code 37664

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
, , 590.00

Date of Receipt
M M ' D D ' Y Y Y Y
04 01 2013

Amount of Each Receipt this Period
, , 590.00

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

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

13031100232

**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)

PAGE 4 OF 9

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Northeast Tennessee Democrat Resource Center

Full Name (Last, First, Middle Initial)

A. *Eekart, Michael*

Mailing Address

240 Boozycreek Road

City

Kingsport

State

TN

Zip Code

37617

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

, *300.00*

Date of Receipt

04 ' 18 ' 2013

Amount of Each Receipt this Period

, *300.00*

Full Name (Last, First, Middle Initial)

B. *McWhorter, Michael*

Mailing Address

P.O. Box 1762

City

Jackson

State

TN

Zip Code

38302

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

, *2500.00*

Date of Receipt

01 ' 11 ' 2013

Amount of Each Receipt this Period

, *2500.00*

Full Name (Last, First, Middle Initial)

C. *Lave, Michael*

Mailing Address

101 Shell Hollow Road

City

Watauga

State

TN

Zip Code

37694

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

, *387.00*

Date of Receipt

06 ' 03 ' 2013

Amount of Each Receipt this Period

, *387.00*

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

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

, , ,
, , ,

13031100233

**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)

PAGE 5 OF 9

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Northeast Tennessee Democrat Resource Center

Full Name (Last, First, Middle Initial)

A. *Hampton, Michael*

Mailing Address

502 North Mohawk Dr.

City

Erwin

State

TN

Zip Code

37650

FEC ID number of contributing federal political committee.

C

Name of Employer

Newbean Fuels

Occupation

Quality Specialist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

35000

Date of Receipt

04 ' 18 ' 2013

Amount of Each Receipt this Period

35000

Full Name (Last, First, Middle Initial)

B. *Garland, Millard*

Mailing Address

111 Ride Land Circle

City

Jackson City

State

TN

Zip Code

37601

FEC ID number of contributing federal political committee.

C

Name of Employer

Retweb

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

15000

Date of Receipt

04 ' 18 ' 2013

Amount of Each Receipt this Period

15000

Full Name (Last, First, Middle Initial)

C. *Vaughn, Nathan*

Mailing Address

1046 Catawba Street

City

Knoxport

State

TN

Zip Code

37660

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

15500

Date of Receipt

01 ' 22 ' 2013

Amount of Each Receipt this Period

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

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

13031100234

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)

PAGE 6 OF 9

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Northeast Tennessee Democrat Resource Center

Full Name (Last, First, Middle Initial)

A. *Harris, Pamela*

Mailing Address

131 Nuckles Dr

City

Tomboroough

State

TN

Zip Code

37659

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▾

Aggregate Year-to-Date ▼

, *155.00*

Date of Receipt

06 ' 03 ' 2013

Amount of Each Receipt this Period

, *155.00*

Full Name (Last, First, Middle Initial)

B. *Sanchez-Vinas, Ramon*

Mailing Address

871 Sycamore Dr

City

Elizabethton

State

TN

Zip Code

37643

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▾

Aggregate Year-to-Date ▼

, *150.00*

Date of Receipt

06 ' 03 ' 2013

Amount of Each Receipt this Period

, *150.00*

Full Name (Last, First, Middle Initial)

C. *Smith, Richard*

Mailing Address

1135 Mountain Road

City

Erwin

State

TN

Zip Code

37650

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▾

Aggregate Year-to-Date ▼

, *225.00*

Date of Receipt

04 ' 18 ' 2013

Amount of Each Receipt this Period

, *225.00*

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

, , .

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

, , .

13031100235

**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)		PAGE 7 OF 9	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
Northeast Tennessee Democrat Resource Center

Full Name (Last, First, Middle Initial) A. <i>Henson, Roy</i>			Date of Receipt M M ' D D ' Y Y Y Y <i>01 ' 11 ' 2013</i>	
Mailing Address <i>P.O. Box 5</i>			Amount of Each Receipt this Period <i>, 150.00</i>	
City <i>Dresden</i>	State <i>TN</i>	Zip Code <i>38225</i>		
FEC ID number of contributing federal political committee. <i>C</i>			Amount of Each Receipt this Period <i>, 150.00</i>	
Name of Employer <i>Self-Employed</i>		Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <i>, 150.00</i>		

Full Name (Last, First, Middle Initial) B. <i>Sullivan County Democrat Party</i>			Date of Receipt M M ' D D ' Y Y Y Y <i>02 ' 26 ' 2013</i>	
Mailing Address			Amount of Each Receipt this Period <i>, 1,000.00</i>	
City <i>Kingsport</i>	State <i>TN</i>	Zip Code <i>37664</i>		
FEC ID number of contributing federal political committee. <i>C</i>			Amount of Each Receipt this Period <i>, 1,000.00</i>	
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <i>, , .</i>		

Full Name (Last, First, Middle Initial) C. <i>Mrazek, Todd</i>			Date of Receipt M M ' D D ' Y Y Y Y <i>02 ' 04 ' 2013</i>	
Mailing Address <i>810 Broadway St.</i>			Amount of Each Receipt this Period <i>, 2000</i>	
City <i>T Johnson City</i>	State <i>TN</i>	Zip Code <i>37601</i>		
FEC ID number of contributing federal political committee. <i>C</i>			Amount of Each Receipt this Period <i>, 2000</i>	
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <i>, 2000</i>		

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

13031100236

**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)

PAGE 8 OF 9

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Northeast Tennessee Democrat Resource Center

A. Union County Democrat Party
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City Erwin State TN 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 , 600.00
 Date of Receipt 06 ' 03 ' 2013
 Amount of Each Receipt this Period , 600.00

B. Buford, Walter
 Full Name (Last, First, Middle Initial)
 Mailing Address 1254 Haintown Road
 City Townesborough State TN Zip Code 37659
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date , 250.00
 Date of Receipt 02 ' 04 ' 2013
 Amount of Each Receipt this Period , 250.00

C. Jackson, Wendel
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 6th Street
 City Bristol State TN Zip Code 37620
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation Self-Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date , 152.00
 Date of Receipt 01 ' 22 ' 2013
 Amount of Each Receipt this Period , 152.00

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

13031100237

**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)

PAGE 9 OF 9

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Northeast Tennessee Democrat Resource Center

Full Name (Last, First, Middle Initial)

A. *Jones, James W.*

Mailing Address

261 Pettysboro Road

City

Kingsport

State

TN

Zip Code

37664

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

, *125.00*

Date of Receipt

01 ' 22 ' 2013

Amount of Each Receipt this Period

, *125.00*

Full Name (Last, First, Middle Initial)

B. *Meek, Janet*

Mailing Address

146 View Bend

City

Johnson City

State

TN

Zip Code

37601

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

, *375.00*

Date of Receipt

01 ' 22 ' 2013

Amount of Each Receipt this Period

, *375.00*

Full Name (Last, First, Middle Initial)

C. *Committee on Political Education*

Mailing Address

1901 Lindell Ave.

City

Nashville

State

TN

Zip Code

37203

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

, *250.00*

Date of Receipt

01 ' 22 ' 2013

Amount of Each Receipt this Period

, *250.00*

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

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

, , .
, , .

13031100238

**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)						PAGE 1 OF 3				
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Northeast Tennessee Democrat Resource Center

A. <i>The Colonial Center</i>		Date of Disbursement
Mailing Address <i>2250 North Rowan St</i>		^M ^M ' ^D ^D ' ^Y ^Y ^Y ^Y <i>06 ' 03 ' 2013</i>
City <i>Johnson City</i>	State <i>TN</i>	Amount of Each Disbursement this Period <i>6,000.00</i>
Zip Code <i>37601</i>		
Purpose of Disbursement <i>Rent</i>		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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

B. <i>Charter Communications</i>		Date of Disbursement
Mailing Address		^M ^M ' ^D ^D ' ^Y ^Y ^Y ^Y <i>06 ' 03 ' 2013</i>
City <i>Johnson City</i>	State <i>TN</i>	Amount of Each Disbursement this Period <i>849.64</i>
Zip Code <i>37601</i>		
Purpose of Disbursement <i>Internet, Cable TV, Telephone</i>		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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

C. <i>Johnson City Power Board</i>		Date of Disbursement
Mailing Address		^M ^M ' ^D ^D ' ^Y ^Y ^Y ^Y <i>06 ' 03 ' 2013</i>
City <i>Johnson City</i>	State <i>TN</i>	Amount of Each Disbursement this Period <i>287.92</i>
Zip Code <i>37601</i>		
Purpose of Disbursement <i>Electric Power</i>		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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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

13031100239

**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)

PAGE 2 OF 3

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Northeast Tennessee Democrat Resource Center

Full Name (Last, First, Middle Initial)

<p>A. <i>State Farm Insurance Co.</i></p> <p>Mailing Address <i>2671 East Center Street</i></p> <p>City <i>Kingsport</i> State <i>TN</i> Zip Code <i>37660</i></p> <p>Purpose of Disbursement <i>Insurance - Office</i></p> <p>Candidate Name</p>		<p>Date of Disbursement M M ' D D ' Y Y Y Y <i>06 ' 03 ' 2013</i></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Amount of Each Disbursement this Period <i>42500</i></p>

<p>B. <i>Holiday Inn</i></p> <p>Mailing Address <i>Road Street</i></p> <p>City <i>Johnson City</i> State <i>TN</i> Zip Code <i>37601</i></p> <p>Purpose of Disbursement</p> <p>Candidate Name <i>Rental, Catering Service</i></p>		<p>Date of Disbursement M M ' D D ' Y Y Y Y <i>01 ' 22 ' 2013</i></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Amount of Each Disbursement this Period <i>889357</i></p>

<p>C. <i>Wanda's Buttons</i></p> <p>Mailing Address</p> <p>City <i>Bluff City</i> State <i>TN</i> Zip Code</p> <p>Purpose of Disbursement <i>Campaign Buttons - Advertising</i></p> <p>Candidate Name</p>		<p>Date of Disbursement M M ' D D ' Y Y Y Y <i>01 ' 04 ' 2013</i></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Amount of Each Disbursement this Period <i>24000</i></p>

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

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

13031100240

**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)						PAGE 3 OF 3
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
Northeast Tennessee Democrat Resource Center

A.

Full Name (Last, First, Middle Initial)
Tennessee Democratic Party

Mailing Address
1900 Church Street

City *Nashville* State *TN* Zip Code *37203*

Purpose of Disbursement
Campaign Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
01 ' 22 ' 2013

Amount of Each Disbursement this Period
43400

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

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

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y

Amount of Each Disbursement this Period
, , .

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

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

13031100241

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

13031100242

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 7/15/13
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>AmA</i> PREPARER	7/25/13 DATE PREPARED

(7/2013)