

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

Headrick for Congress

ADDRESS (number and street) ▼

P.O. Box 218

Check if different than previously reported. (ACC)

Maynardville

TN

37807-0218

2. **FEC IDENTIFICATION NUMBER** ▼

C C00559062

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

TN

03

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 / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Detlef Matt

Signature of Treasurer Detlef Matt

[Electronically Filed]

Date

/ /

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Headrick for Congress

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

	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))....	29749.00	146085.89
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	29749.00	146085.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	53946.38	170953.94
(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)).....	53946.38	170953.94
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-7663.05	
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).....	0.00	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name
Headrick for Congress

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="5225.00"/>	<input type="text" value="89318.15"/>	<input type="text" value="600.00"/>
(ii) Unitemized		
<input type="text" value="2220.00"/>	<input type="text" value="32666.21"/>	<input type="text" value="250.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="7445.00"/>	<input type="text" value="121984.36"/>	<input type="text" value="850.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="9823.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="3304.00"/>	<input type="text" value="3225.00"/>	<input type="text" value="479.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
19000.00	11053.53	19000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
29749.00	146085.89	20329.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
29749.00	146085.89	20329.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Headrick for Congress

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="53946.38"/>	<input type="text" value="170953.94"/>	<input type="text" value="3124.00"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 28

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

0.00	0.00	0.00
------	------	------

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

53946.38	170953.94	3124.00
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

29749.00	146085.89	20329.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

53946.38	170953.94	3124.00
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	16534.33
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	29749.00
25. SUBTOTAL (add Line 23 and Line 24).....	46283.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	53946.38
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	-7663.05

**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 28
	<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	

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)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Fred Behringer

Mailing Address 933 Fort Wood St

City State Zip Code
Chattanooga TN 37403

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

Name of Employer Occupation
Not Employed Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11AI.5579

Amount of Each Receipt this Period
500.00

Campaign Donation

B. Full Name (Last, First, Middle Initial)
Paul Campbell

Mailing Address 718 S Scenic Highway

City State Zip Code
Chattanooga TN 37409

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.5584

Amount of Each Receipt this Period
500.00

Campaign Donation

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

Mailing Address 12 Highdown Ct

City State Zip Code
Signal Mountain TN 37377

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11AI.5598

Amount of Each Receipt this Period
250.00

Campaign Donation

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
	<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)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Jim Marziotti

Mailing Address 201 Dark Hollow Rd

City Andersonville State TN Zip Code 37705

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

Name of Employer Self-Employed Occupation Graphic Artist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 06 / 2014

Transaction ID : SA11AI.5671

Amount of Each Receipt this Period
600.00

In-kind - Graphic Arts Help

B. Full Name (Last, First, Middle Initial)
Tom May

Mailing Address 3185 Reflection Ln

City Ooltewah State TN Zip Code 37363

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

Name of Employer None Occupation Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.5604

Amount of Each Receipt this Period
50.00

Campaign Donation

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

Mailing Address 2116 Colonial Parkway Dr

City Chattanooga State TN Zip Code 37421

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11AI.5288

Amount of Each Receipt this Period
1000.00

Campaign Donation

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

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

1650.00

**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 28
	<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)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Roger Meyer

Mailing Address 2116 Colonial Parkway Dr

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.5607

Amount of Each Receipt this Period
0.00

Already Entered in 48 Hour Notice

B. Full Name (Last, First, Middle Initial)
Cannon Montague

Mailing Address 503 E Brow Rd

City State Zip Code
Lookout Mountain TN 37350

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.5609

Amount of Each Receipt this Period
250.00

Campaign Donation

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

Mailing Address P.O. BOX

City State Zip Code
Chattanooga TN 37401

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

Name of Employer Occupation
Self-Employed Sculptor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11AI.5335

Amount of Each Receipt this Period
1000.00

Campaign Donation

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
	<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)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Deaderick Montague

Mailing Address P.O. BOX

City State Zip Code
Chattanooga TN 37401

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

Name of Employer Occupation
Self-Employed Sculptor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11AI.5608

Amount of Each Receipt this Period
0.00

Already Entered in 48 Hour Notice

B. Full Name (Last, First, Middle Initial)
Ann Mostoller

Mailing Address 115 Indian Ln

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
570.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.5669

Amount of Each Receipt this Period
470.00

In-kind - For Oak Ridger Ads

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

Mailing Address 115 Indian Ln

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
Self-Employed 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
10 / 22 / 2014

Transaction ID : SA11AI.5670

Amount of Each Receipt this Period
30.00

In-kind - For Norris Bulletin Ad

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

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

500.00

**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 28
	<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)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Nancy Munro

Mailing Address 1351 Tuskegee Dr

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
Self-Employed Physiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11AI.5611

Amount of Each Receipt this Period
25.00

Campaign Donation

B. Full Name (Last, First, Middle Initial)
Lisa Selvidge

Mailing Address 7921 Diamondhead Dr

City State Zip Code
Ooltewah TN 37363

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

Name of Employer Occupation
None Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2014

Transaction ID : SA11AI.5627

Amount of Each Receipt this Period
100.00

Campaign Donation

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

Mailing Address 3630 Glen Oaks Dr

City State Zip Code
Chattanooga TN 37412

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11AI.5628

Amount of Each Receipt this Period
200.00

Campaign Donation

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

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

325.00

**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 28
	<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)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
John Wolfe Jr.

Mailing Address 707 Georgia Ave, Suite 302

City State Zip Code
Chattanooga TN 37402

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 31 2014

Transaction ID : SA11AI.5638

Amount of Each Receipt this Period
250.00

Campaign Donation

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

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

Amount of Each Receipt this Period

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

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

250.00

5225.00

**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 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Jane Alderfer

Mailing Address 122 Grandcove Ln

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
None Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2014

Transaction ID : SA11C.5569

Amount of Each Receipt this Period
25.00

Campaign Donation

B. Full Name (Last, First, Middle Initial)
Anonymous Campaign D Anonymous Campaign Donations

Mailing Address P.O. BOX 218

City State Zip Code
Maynardville TN 37807

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

Name of Employer Occupation
n/a n/a

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1454.39

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2014

Transaction ID : SA11C.5573

Amount of Each Receipt this Period
20.00

T-Shirt and Bumper Sticker Sales

C. Full Name (Last, First, Middle Initial)
Anonymous Campaign D Anonymous Campaign Donations

Mailing Address P.O. BOX 218

City State Zip Code
Maynardville TN 37807

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

Name of Employer Occupation
n/a n/a

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2014

Transaction ID : SA11C.5575

Amount of Each Receipt this Period
-20.00

Redesignate: T-Shirt and Bumper Sticker Sales
[MEMO ITEM]

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

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

45.00

**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 28
	<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)
Headrick for Congress

A. Anonymous Campaign D Anonymous Campaign Donations

Full Name (Last, First, Middle Initial)
Anonymous Campaign D Anonymous Campaign Donations

Mailing Address P.O. BOX 218

City State Zip Code
Maynardville TN 37807

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

Name of Employer Occupation
n/a n/a

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2014

Transaction ID : SA11C.5576

Amount of Each Receipt this Period
 20.00

Redesignate: T-Shirt & Bumper Sticker Sales

[MEMO ITEM]

B. IBEW PAC Voluntary Fund

Full Name (Last, First, Middle Initial)
IBEW PAC Voluntary Fund

Mailing Address 900 Seventh St NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** c00027342

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
 10 / 28 / 2014

Transaction ID : SA11C.5568

Amount of Each Receipt this Period
 2500.00

Campaign Donation

C. IBEW PAC Voluntary Fund

Full Name (Last, First, Middle Initial)
IBEW PAC Voluntary Fund

Mailing Address 900 Seventh St NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** c00027342

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
 10 / 31 / 2014

Transaction ID : SA11C.5338

Amount of Each Receipt this Period
 0.00

Mistakenly put in twice

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 15 OF 28
	<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)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Anderson Kemmer

Mailing Address 2465 Beehive Trl

City Signal Mountain State TN Zip Code 37377

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

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
 10 / 29 / 2014

Transaction ID : SA11C.5571

Amount of Each Receipt this Period
 Campaign Donation
 30.00

Election Cycle-to-Date
 30.00

B. Full Name (Last, First, Middle Initial)
Scott County Democratic Party

Mailing Address 5486 Paint Rock Rd

City Oneida State TN Zip Code 37841

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

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
 11 / 04 / 2014

Transaction ID : SA11C.5675

Amount of Each Receipt this Period
 In-kind - for Scott County Newspaper Ad
 250.00

Election Cycle-to-Date
 250.00

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

Mailing Address 5486 Paint Rock Rd

City Oneida State TN Zip Code 37841

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

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
 11 / 07 / 2014

Transaction ID : SA11C.5677

Amount of Each Receipt this Period
 In-kind - for WBNT Radio Oneida Broadcasters Inc Radio Ad
 100.00

Election Cycle-to-Date
 479.00

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

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

380.00

**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 28
	<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)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Scott County Democratic Party

Mailing Address 5486 Paint Rock Rd

City Oneida State TN Zip Code 37841

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
379.00

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

Transaction ID : SA11C.5678

Amount of Each Receipt this Period
 379.00

In-kind - for The Community Shopper Newspaper Ad

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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).....

379.00

3304.00

**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 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Mary M Headrick

Mailing Address P.O. BOX 218

City: Maynardville State: TN Zip Code: 37807-0218

FEC ID number of contributing federal political committee: **C H2TN03144**

Name of Employer: None Occupation: Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 13450.33

Date of Receipt: 10 / 16 / 2014

Transaction ID : SA11D.5658

Amount of Each Receipt this Period: 0.00

Amount for Postage 4,\$31,343.49 electronic xfer from \$35000
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Dr. Mary M Headrick

Mailing Address P.O. BOX 218

City: Maynardville State: TN Zip Code: 37807-0218

FEC ID number of contributing federal political committee: **C H2TN03144**

Name of Employer: None Occupation: Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 13450.33

Date of Receipt: 10 / 16 / 2014

Transaction ID : SA11D.5660

Amount of Each Receipt this Period: 0.00

In-kind - Shipping Postage 3 to use part of check 634
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Dr. Mary M Headrick

Mailing Address P.O. BOX 218

City: Maynardville State: TN Zip Code: 37807-0218

FEC ID number of contributing federal political committee: **C H2TN03144**

Name of Employer: None Occupation: Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 13450.33

Date of Receipt: 10 / 17 / 2014

Transaction ID : SA11D.5659

Amount of Each Receipt this Period: 0.00

In-kind - Stamps to use part of check 634

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 18 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Mary M Headrick

Mailing Address P.O. BOX 218

City: Maynardville State: TN Zip Code: 37807-0218

FEC ID number of contributing federal political committee: **C H2TN03144**

Name of Employer: None Occupation: Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 13450.33

Date of Receipt: 10 / 31 / 2014

Transaction ID : SA11D.5661

Amount of Each Receipt this Period: 0.00

comcast 1195.10 was paid from \$35000 of 10/16 and used to charge
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Dr. Mary M Headrick

Mailing Address P.O. BOX 218

City: Maynardville State: TN Zip Code: 37807-0218

FEC ID number of contributing federal political committee: **C H2TN03144**

Name of Employer: None Occupation: Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 13450.33

Date of Receipt: 11 / 02 / 2014

Transaction ID : SA11D.5662

Amount of Each Receipt this Period: 0.00

In-kind - NGP VAN Robocalls
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Dr. Mary M Headrick

Mailing Address P.O. BOX 218

City: Maynardville State: TN Zip Code: 37807-0218

FEC ID number of contributing federal political committee: **C H2TN03144**

Name of Employer: None Occupation: Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 19000.00

Date of Receipt: 11 / 06 / 2014

Transaction ID : SA11D.5794

Amount of Each Receipt this Period: 19000.00

credit charge payment

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

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

19000.00

19000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 28			
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Ashley Collins		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 6117 Nottingham Dr		Amount of Each Disbursement this Period 1410.00 Transaction ID : SB17.5685
City East Ridge	State TN	
Purpose of Disbursement Volunteer Coordinator Pay		Category/ Type 001
Candidate Name Headrick for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) B. Ashley Collins		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 6117 Nottingham Dr		Amount of Each Disbursement this Period 1845.00 Transaction ID : SB17.5699
City East Ridge	State TN	
Purpose of Disbursement Volunteer Coordinator Pay		Category/ Type 001
Candidate Name Headrick for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) c. Comcast TV		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2014
Mailing Address 2030 Hamilton PI Blvd Suite 300		Amount of Each Disbursement this Period 3000.50 Transaction ID : SB17.5687
City Chattanooga	State TN	
Purpose of Disbursement TV Time		Category/ Type 004
Candidate Name Headrick for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	6255.50
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 20 OF 28	
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Comcast TV		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2030 Hamilton Pl Blvd Suite 300		Amount of Each Disbursement this Period 1195.10 Transaction ID : SB17.5751
City Chattanooga State TN Zip Code 37421	Purpose of Disbursement TV Time 004 Category/Type	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) B. Dr. Mary M Headrick		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 Transaction ID : SB17.5667 [MEMO ITEM]
City Maynardville State TN Zip Code 37807-0218	Purpose of Disbursement In-kind - Shipping Postage 3 to use part of check 634	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) C. Dr. Mary M Headrick		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 Transaction ID : SB17.5682 [MEMO ITEM]
City Maynardville State TN Zip Code 37807-0218	Purpose of Disbursement estimate \$35000 for Zoo Printing electronic payment 001 Category/Type	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

SUBTOTAL of Disbursements This Page (optional).....	1195.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 28			
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Dr. Mary M Headrick		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 Transaction ID : SB17.5683
City Maynardville	State TN	
Purpose of Disbursement for Zoo Printing Postage for postage and printing via electronic		Category/ Type 001
Candidate Name Headrick for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) B. Zoo Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 5700 Bandini Blvd		Amount of Each Disbursement this Period 0.00 Transaction ID : SB17.5683.0
City Commerce	State CA	
Purpose of Disbursement Zoo Printing Postage from \$35000 estimate		Category/ Type 004
Candidate Name Headrick for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) C. Dr. Mary M Headrick		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 Transaction ID : SB17.5668
City Maynardville	State TN	
Purpose of Disbursement In-kind - Stamps to use part of check 634		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 28	
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Dr. Mary M Headrick		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement comcast 1195.10 was paid from \$35000 of 10/16 and used to charge	Transaction ID : SB17.5666
Candidate Name Headrick for Congress	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: TN District: 03		

Full Name (Last, First, Middle Initial) B. Dr. Mary M Headrick		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - NGP VAN Robocalls	Transaction ID : SB17.5665
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: TN District: 03		

Full Name (Last, First, Middle Initial) c. Markco Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1609 Hamill Rd		Amount of Each Disbursement this Period 69.92
City Hixson	State TN	
Zip Code 37343	Purpose of Disbursement Signs 10 4ft x 4ft signs	Transaction ID : SB17.5686
Candidate Name Headrick for Congress	Category/Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

SUBTOTAL of Disbursements This Page (optional).....	69.92
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 23 OF 28	
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Jim Marziotti		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2014
Mailing Address 201 Dark Hollow Rd		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.5672
City Andersonville	State TN Zip Code 37705	
Purpose of Disbursement In-kind - Graphic Arts Help	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ann Mostoller		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 115 Indian Ln		Amount of Each Disbursement this Period 470.00 Transaction ID : SB17.5674
City Oak Ridge	State TN Zip Code 37830	
Purpose of Disbursement In-kind - For Oak Ridger Ads	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ann Mostoller		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 115 Indian Ln		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.5673
City Oak Ridge	State TN Zip Code 37830	
Purpose of Disbursement In-kind - For Norris Bulletin Ad	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1100.00
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 24 OF 28			
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 48 Grove St, Suite 202		Amount of Each Disbursement this Period 1316.37 Transaction ID : SB17.5752
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Robo GOTV telephone calls part of check #634 Category/Type 004	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) B. Scott County Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 5486 Paint Rock Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.5681
City Oneida State TN Zip Code 37841	Purpose of Disbursement In-kind - for Scott County Newspaper Ad Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Scott County Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 5486 Paint Rock Rd		Amount of Each Disbursement this Period 379.00 Transaction ID : SB17.5679
City Oneida State TN Zip Code 37841	Purpose of Disbursement In-kind - for The Community Shopper Newspaper Ad Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1945.37
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 25 OF 28			
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 3009 Maynardville Hwy		Amount of Each Disbursement this Period 132.00 Transaction ID : SB17.5753
City Maynardville	State TN	
Purpose of Disbursement stamps for postage,	Category/ Type 004	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 3009 Maynardville Hwy		Amount of Each Disbursement this Period 132.00 Transaction ID : SB17.5754
City Maynardville	State TN	
Purpose of Disbursement stamps - postage	Category/ Type 004	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

Full Name (Last, First, Middle Initial) C. WDEF-TV		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 3300 Broad St		Amount of Each Disbursement this Period 3034.50 Transaction ID : SB17.5689
City Chattanooga	State TN	
Purpose of Disbursement TV Ads	Category/ Type 004	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	3298.50
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 26 OF 28			
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. WDEF-TV		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 3300 Broad St		Amount of Each Disbursement this Period 935.00 Transaction ID : SB17.5698
City Chattanooga	State TN	
Purpose of Disbursement TV Ads	Category/ Type 004	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

Full Name (Last, First, Middle Initial) B. WECO		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address P.O. BOX 100		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5694
City Wartburg	State TN	
Purpose of Disbursement TV Time	Category/ Type 004	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

Full Name (Last, First, Middle Initial) C. WRCB-TV		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2014
Mailing Address 900 Whitehall Rd		Amount of Each Disbursement this Period 2993.00 Transaction ID : SB17.5688
City Chattanooga	State TN	
Purpose of Disbursement TV Time	Category/ Type 004	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	4428.00
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 27 OF 28			
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. WRCB-TV		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 900 Whitehall Rd		Amount of Each Disbursement this Period 633.00 Transaction ID : SB17.5697
City Chattanooga	State TN	
Purpose of Disbursement TV Time		Category/ Type 004
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

Full Name (Last, First, Middle Initial) B. WTVC Channel 9		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 4279 Benton Dr		Amount of Each Disbursement this Period 2762.50 Transaction ID : SB17.5691
City Chattanooga	State TN	
Purpose of Disbursement TV Time		Category/ Type 004
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

Full Name (Last, First, Middle Initial) C. WVLT		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 6450 Papermill Rd		Amount of Each Disbursement this Period 595.00 Transaction ID : SB17.5696
City Knoxville	State TN	
Purpose of Disbursement TV Time		Category/ Type 004
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	3990.50
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 28 OF 28			
	<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)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Zoo Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 5700 Bandini Blvd		Amount of Each Disbursement this Period 31343.49
City Commerce State CA Zip Code 90040	Purpose of Disbursement postage for mailer	
Candidate Name Headrick for Congress	Category/Type 004	Transaction ID : SB17.5791
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

SUBTOTAL of Disbursements This Page (optional).....	31343.49
TOTAL This Period (last page this line number only).....	53626.38