

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Jim Tracy for Congress

ADDRESS (number and street)

P.O. Box 332490

Check if different than previously reported. (ACC)

Murfreesboro

TN

37133

2. FEC IDENTIFICATION NUMBER ▼

C C00540633

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

TN

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 04 / 01 / 2013

through

M M /

D D /

Y Y Y Y 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 SHANE REEVES

Signature of Treasurer SHANE REEVES

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 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.

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Jim Tracy 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))....	303443.00	739928.00
(b) Total Contribution Refunds (from Line 20(d)) .....	7050.00	7050.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	296393.00	732878.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	44193.21	76676.47
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	44193.21	76676.47
8. Cash on Hand at Close of Reporting Period (from Line 27).....	656201.53	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Jim Tracy for Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	271800.00	666200.00
(ii) Unitemized.....	11843.00	27428.00
(iii) TOTAL of contributions from individuals ▶	283643.00	693628.00
(b) Political Party Committees.....	1000.00	1000.00
(c) Other Political Committees (such as PACs).....	11500.00	37500.00
(d) The Candidate.....	7300.00	7800.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	303443.00	739928.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	303443.00	739928.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	44193.21	76676.47
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7050.00	7050.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	7050.00	7050.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	51243.21	83726.47

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	404001.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	303443.00
25. SUBTOTAL (add Line 23 and Line 24).....	707444.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	51243.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	656201.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 149
	<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)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN H. AARON**

Mailing Address 5961 REDFEARN CV.

City MEMPHIS State TN Zip Code 38120-3020

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

Name of Employer ATHENS DISTRIBUTING CO. Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : SA11.576**

Amount of Each Receipt this Period  
 350.00

CONTRIBUTION

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

Mailing Address 801 MOORELAND LN

City MURFREESBORO State TN Zip Code 37128-4634

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

Name of Employer NATIONAL HEALTH CORP. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2013

**Transaction ID : SA11.40**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 801 MOORELAND LN

City MURFREESBORO State TN Zip Code 37128-4634

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

Name of Employer NATIONAL HEALTH CORP. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 02 / 2013

**Transaction ID : SA11.4**

Amount of Each Receipt this Period  
 -2400.00

CONTRIBUTION

**[MEMO ITEM]**  
 REDESIGNATION TO GENERAL

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ANDY ADAMS**

Mailing Address 801 MOORELAND LN

City MURFREESBORO State TN Zip Code 37128-4634

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

Name of Employer NATIONAL HEALTH CORP. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2013

**Transaction ID : SA11.494**

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

Mailing Address 801 MOORELAND LN

City MURFREESBORO State TN Zip Code 37128-4634

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2013

**Transaction ID : SA11.50**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 801 MOORELAND LN

City MURFREESBORO State TN Zip Code 37128-4634

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2013

**Transaction ID : SA11.492**

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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 7 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KAREN ADAMS**

Mailing Address 801 MOORELAND LN

City MURFREESBORO State TN Zip Code 37128-4634

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2013

**Transaction ID : SA11.5**

Amount of Each Receipt this Period  
-2400.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

Mailing Address 2217 BATTLEGROUND DR.

City MURFREESBORO State TN Zip Code 37129-6006

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.825**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

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

Mailing Address 2217 BATTLEGROUND DR.

City MURFREESBORO State TN Zip Code 37129-6006

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11.825B**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

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

5200.00

**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 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SUSANNE ADAMS**

Mailing Address 2217 BATTLEGROUND DR.

City MURFREESBORO State TN Zip Code 37129-6006

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11.832**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

Mailing Address 131 INDUSTRIAL BLVD.

City LA VERGNE State TN Zip Code 37086-4108

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

Name of Employer OWNER Occupation VENTURE EXPRESS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.799**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 3352 HICKMAN LN

City COLUMBIA State TN Zip Code 38401-8544

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

Name of Employer CAPELLA HEALTHCARE Occupation FOUNDER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.856**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

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

1500.00



**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 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BILL ASKINS**

Mailing Address 60 GROCE RD.

City State Zip Code  
FAYETTEVILLE TN 37334-6575

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

Name of Employer Occupation  
ASKINS PUBLISHING GROUP, INC PUBLISHER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 19 / 2013

**Transaction ID : SA11.714**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 2710 LEWISBURG WHY

City State Zip Code  
PETERSBURG TN 37144-7631

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

Name of Employer Occupation  
BAGLEY & BAGLEY INSURANCE AGENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 17 / 2013

**Transaction ID : SA11.724**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JAMES L. BAILEY JR.**

Mailing Address 619 CIRCLE DR

City State Zip Code  
MT. PLEASANT TN 38474-1003

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

Name of Employer Occupation  
MAURY COUNTY, TENNESSEE MAYOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.864**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

1500.00

**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 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JORDAN M. BAILEY**

Mailing Address 7052 ROBERTS MATTHEWS HWY

City State Zip Code  
COOKEVILLE TN 38506-8904

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

Name of Employer Occupation  
CHARLES BAILEY TRUCKING DISPATCHER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2013

**Transaction ID : SA11.573**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 5505 CHESTERFIELD CV

City State Zip Code  
MEMPHIS TN 38134-3053

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

Name of Employer Occupation  
BAILEY SALES CORP MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2013

**Transaction ID : SA11.678**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**H. LEE BARFIELD II**

Mailing Address 1026 CHANCERY LN.

City State Zip Code  
NASHVILLE TN 37215-4524

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

Name of Employer Occupation  
BASS, BERRY & SIMMS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 20 / 2013

**Transaction ID : SA11.613**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

2000.00

**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 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RUSSELL BARNETTE**

Mailing Address **915 S. ANDERSON ST**

City **TULLAHOMA** State **TN** Zip Code **37388-4007**

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

Name of Employer **SELF-EMPLOYED** Occupation **AUTO DEALER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2013**

**Transaction ID : SA11.807**

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

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

Mailing Address **14 INNISBROOK LN.**

City **BRENTWOOD** State **TN** Zip Code **37027-8940**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.860**

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

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

Mailing Address **2406 9TH AVENUE S**

City **NASHVILLE** State **TN** Zip Code **37204-2425**

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

Name of Employer **RACHEL BARRETT AND CO.** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.905**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**2000.00**

**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 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM N. BATES**

Mailing Address 211 SEVENTH AVE N, STE 420

City: NASHVILLE State: TN Zip Code: 37219-1823

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

Name of Employer: FARRAR & BATES Occupation: ATTORNEY AT LAW

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 03 / 29 / 2013

**Transaction ID : SA11.290**

Amount of Each Receipt this Period: 3000.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 211 SEVENTH AVE N, STE 420

City: NASHVILLE State: TN Zip Code: 37219-1823

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

Name of Employer: FARRAR & BATES Occupation: ATTORNEY AT LAW

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 04 / 02 / 2013

**Transaction ID : SA11.29**

Amount of Each Receipt this Period: -400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 211 SEVENTH AVE N, STE 420

City: NASHVILLE State: TN Zip Code: 37219-1823

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

Name of Employer: FARRAR & BATES Occupation: ATTORNEY AT LAW

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 04 / 02 / 2013

**Transaction ID : SA11.498**

Amount of Each Receipt this Period: 400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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 13 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FARRIS BEASLEY**

Mailing Address **2270 LEWISBURG HWY**

City **FAYETTEVILLE** State **TN** Zip Code **37334-6449**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11.686**

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

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

Mailing Address **508 DEKEMONT LN.**

City **BRENTWOOD** State **TN** Zip Code **37027-5627**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11.651**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **2302 BATTLEGROUND DR**

City **MURFREESBORO** State **TN** Zip Code **37129-6008**

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

Name of Employer **PINNACLE FINANCIAL PARTNERS** Occupation **BANKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.867**

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

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

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

**1750.00**

**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 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DALE M. BIGHAM**

Mailing Address **6 HOLMAN RD**

City **FAYETTEVILLE** State **TN** Zip Code **37334-6428**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 19 / 2013**

**Transaction ID : SA11.712**

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

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

Mailing Address **9624 BRUNSWICK DR.**

City **BRENTWOOD** State **TN** Zip Code **37027-8467**

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

Name of Employer **THE CRICHTON GROUP** Occupation **INSURANCE ADVISOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2013**

**Transaction ID : SA11.567**

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

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

Mailing Address **111 KELLY DR**

City **SMYRNA** State **TN** Zip Code **37167-6318**

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

Name of Employer **RABORN INSURANCE AGENCY** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 17 / 2013**

**Transaction ID : SA11.535**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**2000.00**

**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 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**R. MICHELLE BLAYLOCK-HOWSER**

Mailing Address 121 E MAIN ST.

City MURFREESBORO State TN Zip Code 37130-3726

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.675**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 2816 BEAULAH DR.

City MURFREESBORO State TN Zip Code 37128-5091

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

Name of Employer TDK CONSTRUCTION COMPANY, INC. Occupation DEVELOPER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.862**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 2926 CHERRY BLOSSOM LN.

City MURFREESBORO State TN Zip Code 37129-0225

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

Name of Employer BROGLI, LANE, WEAVER, ALEXANDER Occupation VETERINARIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.872**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID ALAN BROWN**

Mailing Address 114 ASHE ROAD

City State Zip Code  
SHELBYVILLE TN 37160-3784

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

Name of Employer Occupation  
MTPS BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 15 / 2013

**Transaction ID : SA11.570**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 2343 RIVER TERRACE DR.

City State Zip Code  
MURFREESBORO TN 37129-1340

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

Name of Employer Occupation  
ROSCOE BROWN OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 20 / 2013

**Transaction ID : SA11.616**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

Mailing Address 117 CEDAR CREEK DR.

City State Zip Code  
FRANKLIN TN 37067-4076

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

Name of Employer Occupation  
PFIZER DIRECTOR OF GOVERNMENT AFFAIRS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.839**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

3250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STAN BUTCH W. BULLEN JR.**

Mailing Address **PO BOX 8153**

City **MCMINNVILLE** State **TN** Zip Code **37111-8153**

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

Name of Employer **SELF-EMPLOYED** Occupation **INSURANCE AGENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.922**

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

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

Mailing Address **337 COLDWATER CREEK RD.**

City **TAFT** State **TN** Zip Code **38488-5200**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 17 / 2013**

**Transaction ID : SA11.722**

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

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

Mailing Address **712 THIRD AVE**

City **FAYETTEVILLE** State **TN** Zip Code **37334-2110**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 31 / 2013**

**Transaction ID : SA11.639**

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

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

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

**1500.00**

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 18 OF 149

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH CASHIA**

Mailing Address 3200 DEL RIO PIKE

City FRANKLIN State TN Zip Code 37069-8714

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

Name of Employer VIVERE Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.821**

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

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

Mailing Address 1823 SANCTUARY PL

City MURFREESBORO State TN Zip Code 37128-4925

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

Name of Employer BONDWARE INC Occupation BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 22 / 2013

**Transaction ID : SA11.600**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**H. E. CHRISTENBERRY III**

Mailing Address 5271 BENT RIVER BLVD.

City KNOXVILLE State TN Zip Code 37919-9352

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

Name of Employer TRIPLE C DISTRIBUTING Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.661**

Amount of Each Receipt this Period  
 350.00  
 CONTRIBUTION

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DORON CLAIBORNE**

Mailing Address 2613 SEQUOYA TRACE

City MURFREESBORO State TN Zip Code 37127-8361

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

Name of Employer: CLAIBORNE & TAYLOR INSURANCE Occupation: INSURANCE AGENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **750.00**

Date of Receipt: 06 / 26 / 2013

**Transaction ID : SA11.743**

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

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES H. CLARK IV**

Mailing Address PO BOX 771

City MURFREESBORO State TN Zip Code 37133-0771

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

Name of Employer: CLARK IRON & METAL Occupation: PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2600.00**

Date of Receipt: 06 / 26 / 2013

**Transaction ID : SA11.755**

Amount of Each Receipt this Period: **2600.00**

CONTRIBUTION

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

Mailing Address 2847 KEASLER CIRCLE WEST

City GERMANTOWN State TN Zip Code 38139-6828

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

Name of Employer: N/A Occupation: HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2600.00**

Date of Receipt: 06 / 19 / 2013

**Transaction ID : SA11.698**

Amount of Each Receipt this Period: **2600.00**

CONTRIBUTION

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

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

**5700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COL. WAYNE A. COOMES**

Mailing Address 1320 WHITE DR.

City State Zip Code  
LEWISBURG TN 37091-3649

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

Name of Employer Occupation  
LEWISBURG FIRE DEPT. MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.874**

Amount of Each Receipt this Period  
100.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COL. WAYNE A. COOMES**

Mailing Address 1320 WHITE DR.

City State Zip Code  
LEWISBURG TN 37091-3649

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

Name of Employer Occupation  
LEWISBURG FIRE DEPT. MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.953**

Amount of Each Receipt this Period  
200.00  
CONTRIBUTION

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

Mailing Address 546 COOPERTOWN RD.

City State Zip Code  
UNIONVILLE TN 37180-8730

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

Name of Employer Occupation  
N/A HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.923**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

1300.00

**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 21 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KERRY COUCH**

Mailing Address 3898 ALBERT MATTHEWS RD.

City COLUMBIA	State TN	Zip Code 38401-8957
------------------	-------------	------------------------

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

Name of Employer NASHVILLE COMPUTER, INC.	Occupation PRESIDENT
--	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 24 / 2013

**Transaction ID : SA11.790**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 275 RAMBO RD.

City FAYETTEVILLE	State TN	Zip Code 37334-6952
----------------------	-------------	------------------------

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

Name of Employer SELF	Occupation TRUCKING
--------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : SA11.624**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 60 CRAIG RD.

City FAYETTEVILLE	State TN	Zip Code 37334-6116
----------------------	-------------	------------------------

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

Name of Employer CRAIG PROPERTIES	Occupation OWNER
--------------------------------------	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : SA11.713**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KENNETH D. CRENSHAW**

Mailing Address **7551 BARTLETT CORP COVE E**

City **BARTLETT** State **TN** Zip Code **38133-3963**

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

Name of Employer **HERBI-SYSTEMS, INC** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.863**

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

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

Mailing Address **661 GIMLET RD**

City **FAYETTEVILLE** State **TN** Zip Code **37334-6556**

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

Name of Employer **STATE FARM, INS** Occupation **SALES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 19 / 2013**

**Transaction ID : SA11.718**

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

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

Mailing Address **667 GIMLET RD.**

City **FAYETTEVILLE** State **TN** Zip Code **37334-6556**

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

Name of Employer **STATE FARM INSURANCE** Occupation **AGENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 19 / 2013**

**Transaction ID : SA11.719**

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

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARTHA E. CURL**

Mailing Address 3714 CONCORD CT.

City MURFREESBORO State TN Zip Code 37130-6814

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.818**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 8637 ELLARD DR

City ALPHARETTA State GA Zip Code 30022-1662

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

Name of Employer G A FOODS Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 01 / 2013

**Transaction ID : SA11.610**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 211 WILDCREEK RD

City SHELBYVILLE State TN Zip Code 37160-7320

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

Name of Employer DAVIS STOKES Occupation UTILITIES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.877**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

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

4000.00

**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 24 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. W. G. DEMENT**

Mailing Address P.O. BOX 1812

City JACKSON State TN Zip Code 38302-1812

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

Name of Employer DEMENT CONSTRUCTION Occupation CONSTRUCTION

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2013

**Transaction ID : SA11.1190**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address P.O. BOX 1812

City JACKSON State TN Zip Code 38302-1812

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

Name of Employer DEMENT CONSTRUCTION Occupation CONSTRUCTION

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2013

**Transaction ID : SA11.533**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**MR. W. G. DEMENT**

Mailing Address P.O. BOX 1812

City JACKSON State TN Zip Code 38302-1812

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

Name of Employer DEMENT CONSTRUCTION Occupation CONSTRUCTION

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2013

**Transaction ID : SA11.119**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

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

0.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JIM PETE DEMOS**

Mailing Address 618 PALISADE DR

City MURFREESBORO State TN Zip Code 37129-1254

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

Name of Employer DEMOS' RESTAURANT Occupation RESTAURANTEUR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : SA11.609**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 2914 PALACE PL

City MURFREESBORO State TN Zip Code 37129-1184

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

Name of Employer DEMOS' RESTAURANT Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2013

**Transaction ID : SA11.542**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 5432 WORCHESTER DR.

City NASHVILLE State TN Zip Code 37221

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

Name of Employer ATHENS DISTRIBUTING Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : SA11.580**

Amount of Each Receipt this Period  
 350.00  
 CONTRIBUTION

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

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RALPH E. DRURY**

Mailing Address 234 MYLES MANOR

City FRANKLIN State TN Zip Code 37064-2245

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

Name of Employer THE DRURY GROUP Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.649**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 234 MYLES MANOR

City FRANKLIN State TN Zip Code 37064-2245

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

Name of Employer THE DRURY GROUP Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.685**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 925 WEST 7TH STREET

City COLUMBIA State TN Zip Code 38401-3091

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.858**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. JAMES D. EAKIN III</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2013	
Mailing Address 329 OLD FLAT CREEK ROAD		<b>Transaction ID : SA11.809</b>	
City SHELBYVILLE	State TN	Zip Code 37160-5988	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer N/A	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. JAMES L. ELLIS</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2013	
Mailing Address 700 ORCHARD DR.		<b>Transaction ID : SA11.641</b>	
City FAYETTEVILLE	State TN	Zip Code 37334-2245	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer N/A	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>C. MARK A. EMKES</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2013	
Mailing Address 7 CAMEL BACK CT.		<b>Transaction ID : SA11.654</b>	
City BRENTWOOD	State TN	Zip Code 37027-8939	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer N/A	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

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

**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 28 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BILLY JOE EVANS**

Mailing Address 42 TIMBERLAKE DR.

City State Zip Code  
FAYETTEVILLE TN 37334-7060

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

Name of Employer Occupation  
N/A RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : SA11.640**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 155 CUMBERLAND DR

City State Zip Code  
HENDERSONVILLE TN 37075-5301

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

Name of Employer Occupation  
SELF-EMPLOYED SALES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 11 / 2013

**Transaction ID : SA11.1310**

Amount of Each Receipt this Period  
5200.00  
CONTRIBUTION  
**[MEMO ITEM]**

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

Mailing Address 155 CUMBERLAND DR

City State Zip Code  
HENDERSONVILLE TN 37075-5301

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

Name of Employer Occupation  
N/A HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 12 / 2013

**Transaction ID : SA11.515**

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION  
**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

**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 29 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN EVANS**

Mailing Address 155 CUMBERLAND DR

City Hendersonville State TN Zip Code 37075-5301

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

Name of Employer SELF-EMPLOYED Occupation SALES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2013

**Transaction ID : SA11.516**

Amount of Each Receipt this Period  
 -2600.00

CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION TO SPOUSE

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

Mailing Address 112 N RUTHERFORD BOULEVARD

City Murfreesboro State TN Zip Code 37130-5516

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

Name of Employer SELF-EMPLOYED Occupation CAR DEALER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.804**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 7107 BLENHEIM PALACE LN.

City Houston State TX Zip Code 77095-3563

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

Name of Employer SPECTRA ENERGY Occupation DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.769**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

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

1500.00

**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 30 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES R. FARRER**

Mailing Address 1122 BRINKLY AVE.

City MURFREESBORO State TN Zip Code 37129-1718

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

Name of Employer CRF PROPERTIES Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.646**

Amount of Each Receipt this Period  
 3000.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

Mailing Address 3719 ALBERT MATTHEWS ROAD

City COLUMBIA State TN Zip Code 38401-8960

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

Name of Employer WIREMASTERS, INC. Occupation MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.797**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address 100 E VINE ST.

City MURFREESBORO State TN Zip Code 37130-3734

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

Name of Employer NATIONAL HEALTH CORP. Occupation VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.826**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

4500.00

**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 31 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID FLOW**

Mailing Address **207 DERBY GLEN LANE**

City **BRENTWOOD** State **TN** Zip Code **37027-4869**

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

Name of Employer **FLOW CONSTRUCTION COMPANY, INC.** Occupation **CONTRACTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 17 / 2013**

**Transaction ID : SA11.599**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

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

Mailing Address **201 E MAIN ST, STE 300**

City **MURFREESBORO** State **TN** Zip Code **37130-3710**

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

Name of Employer **OLE SOUTH PROPERTIES** Occupation **REAL ESTATE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.949**

Amount of Each Receipt this Period  
**2700.00**

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

Mailing Address **164 QUAIL HOLLOW DR**

City **DYERSBURG** State **TN** Zip Code **38024-7414**

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

Name of Employer **FORD CONSTRUCTION** Occupation **CONTRACTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11.681**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**4200.00**

**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 32 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SHERRY E. FRASE**

Mailing Address 1931 ROLLING CREEK DR.

City MURFREESBORO State TN Zip Code 37128-4927

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.865**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 7141 OLD ZION RD.

City COLUMBIA State TN Zip Code 38401-6035

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

Name of Employer ACLJ Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.653**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 2320 LONDONDERRY DR.

City MURFREESBORO State TN Zip Code 37129-1375

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

Name of Employer NATIONAL HEALTH INVESTORS, INC. Occupation CHIEF CREDIT OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : SA11.781**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

1500.00



**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 33 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LINDSEY GALYEN JR.**

Mailing Address 20 ARDMORE HWY

City	State	Zip Code
FAYETTEVILLE	TN	37334-3731

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

Name of Employer	Occupation
SELF-EMPLOYED, G-SQUARED	PHOTOGRAMMETRIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.817**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address 1001 BETHLEHEM CHURCH RD.

City	State	Zip Code
SHELBYVILLE	TN	37160-6433

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

Name of Employer	Occupation
N/A	HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2013

**Transaction ID : SA11.586**

Amount of Each Receipt this Period  
 1500.00

CONTRIBUTION

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

Mailing Address 2373 BURGrees FALLS RD.

City	State	Zip Code
COOKEVILLE	TN	38506

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

Name of Employer	Occupation
CASH EXPRESS	PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.771**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

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

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

3000.00

**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 34 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS DONNELL GENTRY**

Mailing Address 1123 JOHNNIE BUD LN.

City State Zip Code  
COOKEVILLE TN 38501-9386

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

Name of Employer Occupation  
CASH EXPRESS PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.770**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

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

Mailing Address 617 MOLINO RD.

City State Zip Code  
FAYETTEVILLE TN 37334-6253

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

Name of Employer Occupation  
G SQUARED OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : SA11.709**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

Mailing Address 7 PAINT HOLLOW RD

City State Zip Code  
FAYETTEVILLE TN 37334-6542

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

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : SA11.707**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

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

1500.00

**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 35 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BENNETT JOE GLAZER**

Mailing Address **PO BOX 809013**

City **DALLAS** State **TX** Zip Code **75380-9013**

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

Name of Employer **GLAZER'S** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**05 / 20 / 2013**

**Transaction ID : SA11.617**

Amount of Each Receipt this Period  
**350.00**  
 CONTRIBUTION

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

Mailing Address **2022 OLD WELLS HILL RD.**

City **FAYETTEVILLE** State **TN** Zip Code **37334-3724**

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

Name of Employer **BANK OF LINCOLN CO.** Occupation **BANKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11.645**

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

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

Mailing Address **806 FOURTH AVE.**

City **FAYETTEVILLE** State **TN** Zip Code **37334-2126**

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

Name of Employer **SELF-EMPLOYED** Occupation **BUSINESS OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 19 / 2013**

**Transaction ID : SA11.716**

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

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**J. STAN GOLDEN**

Mailing Address 5 WOODLAKE CT.

City State Zip Code  
FAYETTEVILLE TN 37334-7061

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

Name of Employer Occupation  
GOLDEN'S PAWN & MONEY STORE OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 19 / 2013

**Transaction ID : SA11.710**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 1600 OAK PLAINS RD

City State Zip Code  
ASHLAND CITY TN 37015-9105

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

Name of Employer Occupation  
ALIGN MD CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2013

**Transaction ID : SA11.814**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 339 ROSCOMMON DR

City State Zip Code  
BRISTOL TN 37620-3047

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

Name of Employer Occupation  
SJ STRATEGIC INVESTMENTS, LLC ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2013

**Transaction ID : SA11.756**

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

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

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

3600.00

**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 37 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MARSHA L. GREGORY**

Mailing Address 339 ROSCOMMON DR

City State Zip Code  
BRISTOL TN 37620-3047

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

Name of Employer Occupation  
SERVING ORPHANS WORLDWIDE MARKETING COORDINATOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.757**

Amount of Each Receipt this Period  
 2600.00

CONTRIBUTION

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

Mailing Address 283 MIMOSA RD

City State Zip Code  
FAYETTEVILLE TN 37334-7137

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

Name of Employer Occupation  
LINCOLN PAVING PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : SA11.630**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 310 LINCOLN AVE N

City State Zip Code  
FAYETTEVILLE TN 37334-2430

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

Name of Employer Occupation  
STATE OF TENNESSEE LAWYER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.662**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

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

3850.00

**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 38 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FERRELL HAILE**

Mailing Address 1900 CAIRO RD.

City State Zip Code  
GALLATIN TN 37066-8401

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

Name of Employer Occupation  
SELF-EMPLOYER PHARMACIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 26 / 2013

**Transaction ID : SA11.565**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

Mailing Address 2546 SPARTA ST.

City State Zip Code  
MCMINNVILLE TN 37110-1353

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

Name of Employer Occupation  
SELF-EMPLOYED CONTRACTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 20 / 2013

**Transaction ID : SA11.612**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 2938 LONGFORD DR

City State Zip Code  
MURFREESBORO TN 37129-5815

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

Name of Employer Occupation  
CITY AUTO INDEPENDENT BROKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2013

**Transaction ID : SA11.534**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

3500.00

**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 39 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GREG HALL**

Mailing Address 2938 LONGFORD DR

City MURFREESBORO State TN Zip Code 37129-5815

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

Name of Employer CITY AUTO Occupation INDEPENDENT BROKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.857**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 1489 BRADBERRY DR.

City MURFREESBORO State TN Zip Code 37130-1146

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

Name of Employer THOMAS HAMILTON & ASSOCIATES Occupation ACHITECT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.876**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address PO BOX 1125

City BRENTWOOD State TN Zip Code 37024-1125

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

Name of Employer BSI Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.648**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

1750.00

**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 40 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MELBA REEL- HARGIS**

Mailing Address 752 TANGLEWOOD HILLS RD.

City State Zip Code  
PIKEVILLE TN 37367-3667

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

Name of Employer Occupation  
SELF EMPLOYED GALLERY OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : SA11.577**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 3773 HWY 213 N

City State Zip Code  
SHELBYVILLE TN 37160

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

Name of Employer Occupation  
N/A HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.954**

Amount of Each Receipt this Period  
1500.00  
CONTRIBUTION

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

Mailing Address 205 POWELL PL.

City State Zip Code  
BRENTWOOD TN 37027-7522

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

Name of Employer Occupation  
CHE SAPEAKE BUSINESS CENTER PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.957**

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

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

6750.00



**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 41 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>KEITH HEFLIN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2013	
Mailing Address 138 WOMACK RD		<b>Transaction ID : SA11.747</b>	
City SHELBYVILLE	State TN	Zip Code 37160-6782	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer WORLDS OF GAMES, LLC	Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		
		CONTRIBUTION	
		REDESIGNATION/REATTRIBUTION REQUESTED	

Full Name (Last, First, Middle Initial) <b>WAYMON L. HICKMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 17 / 2013	
Mailing Address 105 WALDEN RD.		<b>Transaction ID : SA11.721</b>	
City COLUMBIA	State TN	Zip Code 38401-5711	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer FIRST FARMERS & MERCHANTS BANK	Occupation SR. CHAIRMAN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		CONTRIBUTION	

Full Name (Last, First, Middle Initial) <b>CHARLES HIGGINS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 19 / 2013	
Mailing Address 1115 SWANSON BLVD.		<b>Transaction ID : SA11.708</b>	
City FAYETTEVILLE	State TN	Zip Code 37334-2160	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer SELF-EMPLOYED	Occupation FUNERAL HOME		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
		CONTRIBUTION	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4100.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 42 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>TOMMY HODGES</b>		Date of Receipt MM / DD / YYYY 02 / 01 / 2013
Mailing Address 2417 HWY 231 N		<b>Transaction ID : SA11.192O</b>
City SHELBYVILLE	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer TITAN TRANSFER	Occupation CHAIRMAN	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>TOMMY HODGES</b>		Date of Receipt MM / DD / YYYY 04 / 01 / 2013
Mailing Address 2417 HWY 231 N		<b>Transaction ID : SA11.192</b>
City SHELBYVILLE	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2400.00
Name of Employer TITAN TRANSFER	Occupation CHAIRMAN	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	<b>[MEMO ITEM]</b> REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) <b>TOMMY HODGES</b>		Date of Receipt MM / DD / YYYY 04 / 01 / 2013
Mailing Address 2417 HWY 231 N		<b>Transaction ID : SA11.518</b>
City SHELBYVILLE	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer TITAN TRANSFER	Occupation CHAIRMAN	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	<b>[MEMO ITEM]</b> REDESIGNATION FROM PRIMARY

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY M. HOLLINGSHEAD**

Mailing Address 7291 WEST JEFFERSON PIKE

City SMYRNA State TN Zip Code 37167-5319

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

Name of Employer SMYRNA READY MIX Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2013**

**Transaction ID : SA11.197O**

Amount of Each Receipt this Period  
**5200.00**

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 7291 WEST JEFFERSON PIKE

City SMYRNA State TN Zip Code 37167-5319

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

Name of Employer SMYRNA READY MIX Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 02 / 2013**

**Transaction ID : SA11.197**

Amount of Each Receipt this Period  
**-2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 7291 WEST JEFFERSON PIKE

City SMYRNA State TN Zip Code 37167-5319

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

Name of Employer SMYRNA READY MIX Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 02 / 2013**

**Transaction ID : SA11.490**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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 44 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY M. HOLLINGSHEAD**

Mailing Address 7291 WEST JEFFERSON PIKE

City State Zip Code  
SMYRNA TN 37167-5319

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

Name of Employer Occupation  
SMYRNA READY MIX CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 19 / 2013

**Transaction ID : SA11.697**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

Mailing Address 3120 ALLEN BERRETT RD

City State Zip Code  
MURFREESBORO TN 37129-7475

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

Name of Employer Occupation  
SMYRNA READY MIX BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 19 / 2013

**Transaction ID : SA11.696**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

SEE REATTRIBUTION

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

Mailing Address 3120 ALLEN BERRETT RD

City State Zip Code  
MURFREESBORO TN 37129-7475

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

Name of Employer Occupation  
SMYRNA READY MIX BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : SA11.733**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

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

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

10400.00

**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 45 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MELISSA HOLLINGSHEAD**

Mailing Address 3120 ALLEN BERRETT RD

City MURFREESBORO State TN Zip Code 37129-7475

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

Name of Employer SMYRNA READY MIX Occupation BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.733B**

Amount of Each Receipt this Period  
 -2600.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

Mailing Address 3120 ALLEN BERRETT RD

City MURFREESBORO State TN Zip Code 37129-7475

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

Name of Employer SMYRNA READY MIX Occupation BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.736**

Amount of Each Receipt this Period  
 2600.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

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

Mailing Address 3120 ALLEN BERRETT RD

City MURFREESBORO State TN Zip Code 37129-7475

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

Name of Employer SMYRNA READY MIX Occupation BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.696B**

Amount of Each Receipt this Period  
 -2600.00

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 149
	<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)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>MIKE HOLLINGSHEAD</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 26 / 2013	
Mailing Address 3120 ALLEN BERRETT RD		<b>Transaction ID : SA11.734B</b>	
City MURFREESBORO	State TN	Amount of Each Receipt this Period -2600.00	
Zip Code 37129-7475		CONTRIBUTION	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b> REDESIGNATION TO GENERAL	
Name of Employer SMYRNA READY MIX	Occupation BUSINESS OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>MIKE HOLLINGSHEAD</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 26 / 2013	
Mailing Address 3120 ALLEN BERRETT RD		<b>Transaction ID : SA11.735</b>	
City MURFREESBORO	State TN	Amount of Each Receipt this Period 2600.00	
Zip Code 37129-7475		CONTRIBUTION	
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b> REDESIGNATION FROM PRIMARY	
Name of Employer SMYRNA READY MIX	Occupation BUSINESS OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>ROGER R. HOPKINS</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 24 / 2013	
Mailing Address 702 EAST MAIN STREET		<b>Transaction ID : SA11.791</b>	
City MURFREESBORO	State TN	Amount of Each Receipt this Period 250.00	
Zip Code 37130-3943		CONTRIBUTION	
FEC ID number of contributing federal political committee. C			
Name of Employer NATIONAL HEALTH INVESTORS, INC.	Occupation CHIEF ACCOUNTING OFFICER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 149
	<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)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KAREN H. HORNSBY**

Mailing Address 1419 VERANDA CIR

City MURFREESBORO State TN Zip Code 37130-3265

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

Name of Employer: TN SUPREME CT Occupation: ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 14 / 2013

**Transaction ID : SA11.655**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

Mailing Address 1310 WOODLAND DR.

City FAYETTEVILLE State TN Zip Code 37334-2020

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

Name of Employer: FAYETTEVILLE PUBLIC UTILITIES Occupation: SECRETARY & DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 30 / 2013

**Transaction ID : SA11.861**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

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

Mailing Address 137 SCHOOL ST.

City JACKSBORO State TN Zip Code 37757-2502

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

Name of Employer: TRIPLE H COAL MINING, LLC Occupation: OPERATIONS DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 26 / 2013

**Transaction ID : SA11.754**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN HOUSTON**

Mailing Address 141 SMITH RD

City State Zip Code  
BELL BUCKLE TN 37020-4802

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

Name of Employer Occupation  
TENNESSEE FARMERS CO-OP SALES MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : SA11.608**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 141 SMITH RD

City State Zip Code  
BELL BUCKLE TN 37020-4802

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

Name of Employer Occupation  
TENNESSEE FARMERS CO-OP SALES MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2013

**Transaction ID : SA11.795**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 3333 FAIRFIELD PIKE

City State Zip Code  
BELL BUCKLE TN 37020-4206

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

Name of Employer Occupation  
ADAMS & REESE LAWYER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2013

**Transaction ID : SA11.588**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

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

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

3100.00



**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 49 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HENRY A. HUDDLESTON**

Mailing Address **PO BOX 458**

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

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

Name of Employer **HUDDLESTON OIL COMPANY** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 17 / 2013**

**Transaction ID : SA11.536**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **PO BOX 38289**

City **GERMANTOWN** State **TN** Zip Code **38183-0289**

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

Name of Employer **STANDARD CONSTRUCTION CO. INC.** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11.687**

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

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

Mailing Address **PO BOX 38209**

City **GERMANTOWN** State **TN** Zip Code **38183**

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

Name of Employer **STANDARD CONSTRUCTION COMPANY** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11.682**

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

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

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

**2000.00**

**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 50 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TIFFANI LYN HUTCHENS**

Mailing Address 1537 AVELLINO CIR

City MURFREESBORO State TN Zip Code 37130-7610

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 20 / 2013**

**Transaction ID : SA11.626**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

Mailing Address 1537 AVELLINO CIR

City MURFREESBORO State TN Zip Code 37130-7610

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 31 / 2013**

**Transaction ID : SA11.631**

Amount of Each Receipt this Period  
**2700.00**  
 CONTRIBUTION

SEE REATTRIBUTION

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

Mailing Address 1537 AVELLINO CIR

City MURFREESBORO State TN Zip Code 37130-7610

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

Name of Employer **NATIONAL HEALTH INVESTORS** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 20 / 2013**

**Transaction ID : SA11.726**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION FROM SPOUSE

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

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

**5200.00**

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

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

FOR LINE NUMBER: PAGE 51 OF 149  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TIFFANI LYN HUTCHENS**

Mailing Address 1537 AVELLINO CIR

City MURFREESBORO State TN Zip Code 37130-7610

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **2600.00**

Date of Receipt: **06 / 20 / 2013**

**Transaction ID : SA11.631B**

Amount of Each Receipt this Period: **-2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**J. R. HYDE III**

Mailing Address 17 W PONTOTOC AVE, STE 100

City MEMPHIS State TN Zip Code 38103-3826

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

Name of Employer: **AUTO ZONE** Occupation: **OWNER/FOUNDER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **500.00**

Date of Receipt: **06 / 30 / 2013**

**Transaction ID : SA11.869**

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

CONTRIBUTION

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

Mailing Address P.O. BOX 50058

City NASHVILLE State TN Zip Code 37205-0058

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

Name of Employer: **INGRAM CONTENT GROUP** Occupation: **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **5000.00**

Date of Receipt: **02 / 20 / 2013**

**Transaction ID : SA11.2150**

Amount of Each Receipt this Period: **5000.00**

CONTRIBUTION

**[MEMO ITEM]**

**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 52 OF 149
	<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)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN R. INGRAM**

Mailing Address P.O. BOX 50058

City: NASHVILLE State: TN Zip Code: 37205-0058

FEC ID number of contributing federal political committee: C

Name of Employer: INGRAM CONTENT GROUP Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 04 / 09 / 2013

**Transaction ID : SA11.215**

Amount of Each Receipt this Period: -2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address P.O. BOX 50058

City: NASHVILLE State: TN Zip Code: 37205-0058

FEC ID number of contributing federal political committee: C

Name of Employer: INGRAM CONTENT GROUP Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 04 / 09 / 2013

**Transaction ID : SA11.520**

Amount of Each Receipt this Period: 2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

Mailing Address 9229 HUNTERBORO DR.

City: BRENTWOOD State: TN Zip Code: 37027-6104

FEC ID number of contributing federal political committee: C

Name of Employer: ACADIA HEALTHCARE Occupation: CHAIRMAN/CHIEF EXECUTIVE OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 03 / 26 / 2013

**Transaction ID : SA11.2180**

Amount of Each Receipt this Period: 2700.00

CONTRIBUTION

**[MEMO ITEM]**

**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 53 OF 149
	<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)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DEBORAH H. JACOBS**

Mailing Address 9229 HUNTERBORO DR

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
N/A HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 02 / 2013

**Transaction ID : SA11.499**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

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

Mailing Address 9229 HUNTERBORO DR.

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
ACADIA HEALTHCARE CHAIRMAN/CHIEF EXECUTIVE OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 02 / 2013

**Transaction ID : SA11.500**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

Mailing Address 9229 HUNTERBORO DR.

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
ACADIA HEALTHCARE CHAIRMAN/CHIEF EXECUTIVE OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2013

**Transaction ID : SA11.730**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

SEE REATTRIBUTION

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

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

5200.00

**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 54 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DEBORAH H. JACOBS**

Mailing Address 9229 HUNTERBORO DR

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
N/A HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : SA11.737**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REATTRIBUTION FROM SPOUSE

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

Mailing Address 9229 HUNTERBORO DR

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
N/A HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : SA11.737B**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REDESIGNATION TO GENERAL

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

Mailing Address 9229 HUNTERBORO DR

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
N/A HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : SA11.740**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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 55 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOEY A. JACOBS**

Mailing Address 9229 HUNTERBORO DR.

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
ACADIA HEALTHCARE CHAIRMAN/CHIEF EXECUTIVE OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.730B**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

Mailing Address 9229 HUNTERBORO DR.

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
ACADIA HEALTHCARE CHAIRMAN/CHIEF EXECUTIVE OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.738B**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REDESIGNATION TO GENERAL

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

Mailing Address 9229 HUNTERBORO DR.

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
ACADIA HEALTHCARE CHAIRMAN/CHIEF EXECUTIVE OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.739**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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 56 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DOUGLAS JETT**

Mailing Address 5420 MOCKINGBIRD DR.

City KNOXVILLE State TN Zip Code 37919-8932

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

Name of Employer D&V DISTRIBUTING CO. Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : SA11.579**

Amount of Each Receipt this Period  
 350.00  
 CONTRIBUTION

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

Mailing Address 2425 CRAIG COVE RD.

City KNOXVILLE State TN Zip Code 37919-9314

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

Name of Employer BEVERAGE CONTROL, INC. Occupation PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : SA11.578**

Amount of Each Receipt this Period  
 350.00  
 CONTRIBUTION

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

Mailing Address 1509 WINDERMERE DRIVE

City COLUMBIA State TN Zip Code 38401-5121

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

Name of Employer TN STATE GOVERNMENT Occupation COMMISSIONER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.802**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1200.00



**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 57 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID S. JONES**

Mailing Address 1811 RIVERVIEW DR

City MURFREESBORO State TN Zip Code 37129-6020

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : SA11.2310**

Amount of Each Receipt this Period  
7500.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 1811 RIVERVIEW DR

City MURFREESBORO State TN Zip Code 37129-6020

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013

**Transaction ID : SA11.510**

Amount of Each Receipt this Period  
-5000.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

Mailing Address 1811 RIVERVIEW DR

City MURFREESBORO State TN Zip Code 37129-6020

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013

**Transaction ID : SA11.509**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID S. JONES**

Mailing Address 1811 RIVERVIEW DR

City MURFREESBORO State TN Zip Code 37129-6020

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : SA11.5100**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 1811 RIVERVIEW DR

City MURFREESBORO State TN Zip Code 37129-6020

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2013

**Transaction ID : SA11.510B**

Amount of Each Receipt this Period  
-2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 1811 RIVERVIEW DR

City MURFREESBORO State TN Zip Code 37129-6020

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2013

**Transaction ID : SA11.514**

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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 59 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 1626 WEXFORD DR

City MURFREESBORO State TN Zip Code 37129-5846

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

Name of Employer QUALITY FURNITURE COMPANY, INC. Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : SA11.794**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

Mailing Address 3488 ARMSTRONG VALLEY RD

City MURFREESBORO State TN Zip Code 37128-6312

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

Name of Employer JONES FINANCIAL, LLC Occupation SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : SA11.2300**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 3488 ARMSTRONG VALLEY RD

City MURFREESBORO State TN Zip Code 37128-6312

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

Name of Employer JONES FINANCIAL, LLC Occupation SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 11 / 2013

**Transaction ID : SA11.496**

Amount of Each Receipt this Period  
 -500.00

CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION TO SPOUSE

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WENDELL T. JONES**

Mailing Address 3488 ARMSTRONG VALLEY RD

City MURFREESBORO State TN Zip Code 37128-6312

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

Name of Employer JONES PETROLEUM Occupation SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 11 / 2013

**Transaction ID : SA11.495**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

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

Mailing Address 1811 RIVERVIEW DR

City MURFREESBORO State TN Zip Code 37129-6020

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : SA11.509O**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 1811 RIVERVIEW DR

City MURFREESBORO State TN Zip Code 37129-6020

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 08 / 2013

**Transaction ID : SA11.509B**

Amount of Each Receipt this Period  
-2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**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 61 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PALYCE W. JONES**

Mailing Address 1811 RIVERVIEW DR

City MURFREESBORO State TN Zip Code 37129-6020

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 08 / 2013

**Transaction ID : SA11.512**

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

Mailing Address 605 CONKINNON DRT

City LENOIR CITY State TN Zip Code 37772-3983

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

Name of Employer COULTER & JUSTUS, PC Occupation SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : SA11.760**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address PO BOX 45

City FAYETTEVILLE State TN Zip Code 37334-0045

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 19 / 2013

**Transaction ID : SA11.715**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**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 62 OF 149
	<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)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LARRY KIDWELL**

Mailing Address 1755 CHARITY DR.

City State Zip Code  
BRENTWOOD TN 37027-8672

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

Name of Employer Occupation  
KIDWELL & COMPANY INC. PUBLIC FINANCE INVESTMENT BANKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.842**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GARY R. KING**

Mailing Address P.O. BOX 607

City State Zip Code  
SHELBYVILLE TN 37162-0607

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

Name of Employer Occupation  
SELF-EMPLOYED SOUTHERN ENERGY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.801**

Amount of Each Receipt this Period  
 2600.00

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

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

Mailing Address 1112 LORME CT.

City State Zip Code  
BRENTWOOD TN 37027-7896

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

Name of Employer Occupation  
NEW CHANNEL 5 MARKETING CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : SA11.689**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

4600.00

**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 63 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT L. KIRBY**

Mailing Address **PO BOX 669**

City **MCMINNVILLE** State **TN** Zip Code **37111-0669**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 31 / 2013**

**Transaction ID : SA11.629**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **570 CHURCH ST E, APT 1014**

City **BRENTWOOD** State **TN** Zip Code **37027-3927**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.885**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **1414 BUCKINGHAM DR.**

City **MURFREESBORO** State **TN** Zip Code **37129-0829**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 10 / 2013**

**Transaction ID : SA11.583**

Amount of Each Receipt this Period  
**350.00**  
 CONTRIBUTION

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

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

**2350.00**

**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 64 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 1520 EMERSON ROAD

City ALAMO State TN Zip Code 38001-4748

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

Name of Employer BELLS NURSING & REHAB. CENTER Occupation ADMINISTRATOR/OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2013

**Transaction ID : SA11.247**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 1520 EMERSON ROAD

City ALAMO State TN Zip Code 38001-4748

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

Name of Employer BELLS NURSING & REHAB. CENTER Occupation ADMINISTRATOR/OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2013

**Transaction ID : SA11.792**

Amount of Each Receipt this Period  
2350.00  
CONTRIBUTION

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

Mailing Address 422 MCGAUGHEY ST

City DYERSBURG State TN Zip Code 38024-3841

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

Name of Employer SELF Occupation 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 Y Y  
06 / 14 / 2013

**Transaction ID : SA11.684**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

3100.00



**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 65 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 5145 BEDFORD CREEK ROAD

City: FRANKLIN State: TN Zip Code: 37064-9443

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

Name of Employer: LEE COMPANY Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 05 / 31 / 2013

**Transaction ID : SA11.634**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

Mailing Address 5145 BEDFORD CREEK ROAD

City: FRANKLIN State: TN Zip Code: 37064-9443

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

Name of Employer: LEE COMPANY Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 06 / 13 / 2013

**Transaction ID : SA11.779**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM W. LEE JR.**

Mailing Address 116 BANE DR

City: SMYRNA State: TN Zip Code: 37167-3626

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

Name of Employer: N/A Occupation: RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 05 / 20 / 2013

**Transaction ID : SA11.615**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

2250.00

**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 66 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SONYA ADAMS LEEMAN**

Mailing Address 2929 CHERRY BLOSSOM LN.

City MURFREESBORO State TN Zip Code 37129-0226

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.828**

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

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

Mailing Address 2929 CHERRY BLOSSOM LN.

City MURFREESBORO State TN Zip Code 37129-0226

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

Name of Employer NATIONAL HEALTH CORP. Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.815**

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT S. LIPMAN**

Mailing Address P.O. BOX 280300

City NASHVILLE State TN Zip Code 37228-0300

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

Name of Employer LIPMAN BROS. INC. Occupation SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 20 / 2013

**Transaction ID : SA11.2600**

Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**[MEMO ITEM]**

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

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

5200.00

**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 67 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT S. LIPMAN**

Mailing Address P.O. BOX 280300

City: NASHVILLE State: TN Zip Code: 37228-0300

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

Name of Employer: LIPMAN BROS. INC. Occupation: SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 04 / 12 / 2013

**Transaction ID : SA11.260**

Amount of Each Receipt this Period: -2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT S. LIPMAN**

Mailing Address P.O. BOX 280300

City: NASHVILLE State: TN Zip Code: 37228-0300

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

Name of Employer: LIPMAN BROS. INC. Occupation: SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 04 / 12 / 2013

**Transaction ID : SA11.522**

Amount of Each Receipt this Period: 2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

Mailing Address 2121 CHICKERING LANE

City: NASHVILLE State: TN Zip Code: 37215-5401

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

Name of Employer: LITTLEJOHN ENGINEERING ASSOCIATES Occupation: ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 06 / 28 / 2013

**Transaction ID : SA11.810**

Amount of Each Receipt this Period: 300.00

CONTRIBUTION

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

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

300.00

**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 68 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ALFRED EUGENE LUMPKIN**

Mailing Address 2625 SMOKY RD

City SAVANNAH State TN Zip Code 38372-7273

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

Name of Employer ISR GROUP, INC Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2013

**Transaction ID : SA11.262O**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 2625 SMOKY RD

City SAVANNAH State TN Zip Code 38372-7273

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

Name of Employer ISR GROUP, INC Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2013

**Transaction ID : SA11.262**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 2625 SMOKY RD

City SAVANNAH State TN Zip Code 38372-7273

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

Name of Employer ISR GROUP, INC Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2013

**Transaction ID : SA11.504**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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: PAGE 69 OF 149  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AUSTIN MADISON**  
 Mailing Address 134 ALTON ROAD  
 City State Zip Code  
 NASHVILLE TN 37205-4202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 THE CRICHTON GROUP SALES  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 02 / 2013  
**Transaction ID : SA11.264**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RAY MARCROM**  
 Mailing Address 1277 MCARTHUR ST  
 City State Zip Code  
 MANCHESTER TN 37355-2423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHARMACIST  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 31 / 2013  
**Transaction ID : SA11.636**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN C. MARSH**  
 Mailing Address 150 PROVIDENCE RD.  
 City State Zip Code  
 FAYETTEVILLE TN 37334-7022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BIG G EXPRESS, INC CEO  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 31 / 2013  
**Transaction ID : SA11.637**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**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 70 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**OWEN P. MARSH**

Mailing Address P.O. BOX 1650

City State Zip Code  
SHELBYVILLE TN 37162-1650

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

Name of Employer Occupation  
OPM PROPERTIES SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 19 / 2013

**Transaction ID : SA11.693**

Amount of Each Receipt this Period  
1700.00

CONTRIBUTION

SEE REATTRIBUTION

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

Mailing Address P.O. BOX 1650

City State Zip Code  
SHELBYVILLE TN 37162-1650

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

Name of Employer Occupation  
OPM PROPERTIES OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 20 / 2013

**Transaction ID : SA11.728**

Amount of Each Receipt this Period  
1350.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

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

Mailing Address P.O. BOX 1650

City State Zip Code  
SHELBYVILLE TN 37162-1650

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

Name of Employer Occupation  
OPM PROPERTIES SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 20 / 2013

**Transaction ID : SA11.693B**

Amount of Each Receipt this Period  
-1350.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

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

1700.00

**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 71 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 555 JOYCE CIRCLE

City State Zip Code  
LEWISBURG TN 37091-3656

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

Name of Employer Occupation  
FIRST COMMERCE BANK BANKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2013

**Transaction ID : SA11.796**

Amount of Each Receipt this Period  
100.00  
CONTRIBUTION

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

Mailing Address 3817 RIVER VISTA WAY

City State Zip Code  
LOUISVILLE TN 37777-4147

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

Name of Employer Occupation  
MASSEY CONSTRUCTION CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.925**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 151 HERITAGE PARK DR, STE 201

City State Zip Code  
MURFREESBORO TN 37129-0505

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

Name of Employer Occupation  
RANDALL MATLOCK & ASSOCIATES, PC CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2013

**Transaction ID : SA11.785**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

1600.00

**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 72 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SHANE MCFARLAND**

Mailing Address 1450 TWIN FEATHER DR

City MURFREESBORO State TN Zip Code 37129-1056

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

Name of Employer MCFARLAND CONSTRUCTION Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : SA11.620**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 103 GILLETTE DR

City FRANKLIN State TN Zip Code 37069-4188

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

Name of Employer SELF-EMPLOYED Occupation ADVERTISING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.798**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 117 E LAFAYETTE ST

City JACKSON State TN Zip Code 38301-6203

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

Name of Employer TLM ASSOCIATES, INC Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 17 / 2013

**Transaction ID : SA11.549**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

2250.00



**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 73 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AUSTIN MCMULLEN**

Mailing Address 955 GREENLAND DR.

City: NASHVILLE State: TN Zip Code: 37204-4053

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED Occupation: ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 30 / 2013

**Transaction ID : SA11.859**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

Mailing Address P.O. BOX 939

City: COOKEVILLE State: TN Zip Code: 38503-0939

FEC ID number of contributing federal political committee: C

Name of Employer: CASH EXPRESS, LLC Occupation: ACCOUNTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 6000.00

Date of Receipt: 02 / 11 / 2013

**Transaction ID : SA11.2860**

Amount of Each Receipt this Period: 5000.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address P.O. BOX 939

City: COOKEVILLE State: TN Zip Code: 38503-0939

FEC ID number of contributing federal political committee: C

Name of Employer: CASH EXPRESS, LLC Occupation: ACCOUNTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 6000.00

Date of Receipt: 04 / 09 / 2013

**Transaction ID : SA11.286**

Amount of Each Receipt this Period: -2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GARRY MCNABB**

Mailing Address P.O. BOX 939

City: **COOKEVILLE** State: **TN** Zip Code: **38503-0939**

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

Name of Employer: **CASH EXPRESS, LLC** Occupation: **ACCOUNTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6000.00**

Date of Receipt: **04 / 09 / 2013**

**Transaction ID : SA11.524**

Amount of Each Receipt this Period: **2400.00**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

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

Mailing Address P.O. BOX 939

City: **COOKEVILLE** State: **TN** Zip Code: **38503-0939**

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

Name of Employer: **CASH EXPRESS, LLC** Occupation: **ACCOUNTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6000.00**

Date of Receipt: **06 / 27 / 2013**

**Transaction ID : SA11.768**

Amount of Each Receipt this Period: **1000.00**

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

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

Mailing Address **100 CHERRY SPRINGS ROAD**

City: **TULLAHOMA** State: **TN** Zip Code: **37388-5379**

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

Name of Employer: **STAN MCNABB AUTOMOTIVE** Occupation: **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000.00**

Date of Receipt: **06 / 22 / 2013**

**Transaction ID : SA11.789**

Amount of Each Receipt this Period: **1000.00**

CONTRIBUTION

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

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

**2000.00**

**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 75 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TERESA MCNABB**

Mailing Address P.O. BOX 939

City State Zip Code  
COOKEVILLE TN 38503-0939

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

Name of Employer Occupation  
CASH EXPRESS LLC PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11.813**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

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

Mailing Address 1451 HWY 64 W

City State Zip Code  
SHELBYVILLE TN 37160-6314

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

Name of Employer Occupation  
SECURITY FINANCE VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2013

**Transaction ID : SA11.537**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

Mailing Address 733 SPRINGLAKE DR.

City State Zip Code  
FRANKLIN TN 37064-4839

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

Name of Employer Occupation  
WALKER & DUNLOP VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.871**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 6520 SHERWOOD DR.

City KNOXVILLE State TN Zip Code 37919-7420

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

Name of Employer KNOXVILLE BEVERAGE Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : SA11.695**

Amount of Each Receipt this Period  
 350.00  
 CONTRIBUTION

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

Mailing Address 692 OLD ORCHARD DRIVE

City BRENTWOOD State TN Zip Code 37027-5194

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 13 / 2013

**Transaction ID : SA11.778**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 145 2ND AVENUE S

City FRANKLIN State TN Zip Code 37064-2692

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.888**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

1850.00

**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 77 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD C. MOORE JR.**

Mailing Address 6429 KIRBY RIDGE COVE

City MEMPHIS State TN Zip Code 38119-6525

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

Name of Employer LEHMAN-ROBERTS COMPANY Occupation DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.683**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM L. MOORE JR.**

Mailing Address 631 BAND DR.

City FRANKLIN State TN Zip Code 37064-3087

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

Name of Employer GRESHAM, SMITH & PTRS Occupation CIVIL ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.644**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 1011 GLASSGOW DR.

City MURFREESBORO State TN Zip Code 37130-3189

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

Name of Employer MURFREE & MURFREE Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.667**

Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

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

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

1200.00

**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 78 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH R. NACARATO**

Mailing Address 5213 COLFAX CT.

City State Zip Code  
BRENTWOOD TN 37027-3013

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

Name of Employer Occupation  
NACARATO VOLVO TRUCKS PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : SA11.622**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL J. NACARATO JR.**

Mailing Address 2435 HIDDEN RIVER LN.

City State Zip Code  
FRANKLIN TN 37069-6933

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

Name of Employer Occupation  
NACARATO VOLVO TRUCKS PARTNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : SA11.623**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 3390 DOZER LN.

City State Zip Code  
KNOXVILLE TN 37920-5569

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

Name of Employer Occupation  
FAIRFAX CONSTRUCTION HOMEBUILDER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : SA11.720**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATHAN SCOTT NICHOLS**

Mailing Address 3625 MANSON PIKE, APT 1205

City MURFREESBORO	State TN	Zip Code 37129-4122
----------------------	-------------	------------------------

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

Name of Employer STATE OF TENNESSEE	Occupation ASSISTANT DISTRICT ATTORNEY GENERAL
--	---

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.657**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 69 CHALET DR

City MANCHESTER	State TN	Zip Code 37355-7432
--------------------	-------------	------------------------

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

Name of Employer MIKE NIEDERHAUSER'S GIFTS	Occupation OWNER
---	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 26 / 2013

**Transaction ID : SA11.564**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

Mailing Address 3103 SAINT JOHNS DR.

City MURFREESBORO	State TN	Zip Code 37129-5835
----------------------	-------------	------------------------

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

Name of Employer NOBLES LAW GROUP	Occupation ATTORNEY
--------------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.891**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

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

4500.00

**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 80 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 3103 SAINT JOHNS DR.

City MURFREESBORO State TN Zip Code 37129-5835

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

Name of Employer NOBLES LAW GROUP Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.916**

Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

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

Mailing Address 50 W DAVIS RD.

City COOKEVILLE State TN Zip Code 38506-4248

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

Name of Employer HIGHWAYS, INC Occupation V.P.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.883**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 8613 BEAVERWOOD DR

City GERMANTOWN State TN Zip Code 38138-7740

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

Name of Employer OSEMAN INSURANCE AGENCY Occupation PRESIDENT & OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.746**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

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

3100.00



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

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

FOR LINE NUMBER: PAGE 81 OF 149  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM J. PARSONS**

Mailing Address **704 SWANSON BLVD**

City **FAYETTEVILLE** State **TN** Zip Code **37334-2335**

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

Name of Employer **PARSONS OIL CO.** Occupation **PETROLEUM MARKTER-RETAIL OPERATOR**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11.676**

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

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES L. PATRICK JR. DVM**

Mailing Address **146 PATRICK RD**

City **FAYETTEVILLE** State **TN** Zip Code **37334-6631**

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

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

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 19 / 2013**

**Transaction ID : SA11.706**

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

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

Mailing Address **525 E FOX DEN DR.**

City **KNOXVILLE** State **TN** Zip Code **37934-2505**

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

Name of Employer **SMOKEY MOUNTAIN COAL CORP** Occupation **COAL SALES**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 26 / 2013**

**Transaction ID : SA11.759**

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

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

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

**1500.00**

**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 82 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DR. L. G. PUCKETT DDS**

Mailing Address 508 N CHURCH ST

City State Zip Code  
LIVINGSTON TN 38570-1539

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

Name of Employer Occupation  
SELF-EMPLOYED DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 31 2013

**Transaction ID : SA11.339O**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**DR. L. G. PUCKETT DDS**

Mailing Address 508 N CHURCH ST

City State Zip Code  
LIVINGSTON TN 38570-1539

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

Name of Employer Occupation  
SELF-EMPLOYED DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 09 2013

**Transaction ID : SA11.339**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**DR. L. G. PUCKETT DDS**

Mailing Address 508 N CHURCH ST

City State Zip Code  
LIVINGSTON TN 38570-1539

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

Name of Employer Occupation  
SELF-EMPLOYED DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 09 2013

**Transaction ID : SA11.506**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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 83 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DR. L. G. PUCKETT DDS**

Mailing Address 508 N CHURCH ST

City State Zip Code  
LIVINGSTON TN 38570-1539

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

Name of Employer Occupation  
SELF-EMPLOYED DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.878**

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

Mailing Address PO BOX 129

City State Zip Code  
SHELBYVILLE TN 37162-0129

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  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 14 / 2013

**Transaction ID : SA11.677**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 121 E MAIN ST

City State Zip Code  
MURFREESBORO TN 37130-3726

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  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 14 / 2013

**Transaction ID : SA11.658**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

3000.00

**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 84 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY L. REED**

Mailing Address 2908 WOLVES TRL

City MURFREESBORO State TN Zip Code 37127-8382

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2013

**Transaction ID : SA11.674**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address P.O. BOX 4089

City MURFREESBORO State TN Zip Code 37129-4089

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

Name of Employer REEVES-SAIN PHARMACY Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.880**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

**C.** Full Name (Last, First, Middle Initial)  
**W. SHANE REEVES PHARM.D.**

Mailing Address 135 BLACKBERRY LN.

City MURFREESBORO State TN Zip Code 37130-6885

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

Name of Employer REEVES-SAIN PHARMACY Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.879**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

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

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

2250.00

**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 85 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**W. SHANE REEVES PHARM.D.**

Mailing Address 135 BLACKBERRY LN.

City MURFREESBORO State TN Zip Code 37130-6885

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

Name of Employer REEVES-SAIN PHARMACY Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.912**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

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

Mailing Address 1038 CARTER BLAKE RD.

City TULLAHOMA State TN Zip Code 37388-5020

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

Name of Employer CFC RECYCLING, INC Occupation BUSINESS OWNER

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  
 05 / 31 / 2013

**Transaction ID : SA11.638**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

Mailing Address 405 HUNTINGTON RIDGE DR.

City NASHVILLE State TN Zip Code 37211-5921

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

Name of Employer COMMUNITY EDUCATION PARTNERS Occupation BUSINESSMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.887**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

4500.00

**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 86 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KEITH M. RIGGINS**

Mailing Address 169 DUBRAY CREEK CV.

City State Zip Code  
COLLIERVILLE TN 38017-3960

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

Name of Employer Occupation  
UNITED LIQUORS CORP GENERAL MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : SA11.581**

Amount of Each Receipt this Period  
 350.00  
 CONTRIBUTION

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

Mailing Address 411 CREEKSIDE DR.

City State Zip Code  
LEWISBURG TN 37091-3588

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

Name of Employer Occupation  
ROBERTS MO. COMPANY, INC DBA ROBERT AUTO DEALER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.806**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 1161 OLD LANCASTER RD.

City State Zip Code  
HICKMAN TN 38567-3025

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

Name of Employer Occupation  
TENNESSEE ELECTRIC COOPERATIVE ASSOCIATION GOVERNMENT AFFAIRS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.822**

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

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

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

3950.00

**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 87 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN W. ROSE**

Mailing Address 1161 OLD LANCASTER RD.

City State Zip Code  
HICKMAN TN 38567-3025

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

Name of Employer Occupation  
SELF-EMPLOYED FARMER/BUSINESSMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2013

**Transaction ID : SA11.823**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

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

Mailing Address 203 #C CASTLEWOOD CT.

City State Zip Code  
MURFREESBORO TN 37129

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

Name of Employer Occupation  
ROSS FINANCIAL PLANNING PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 20 / 2013

**Transaction ID : SA11.974A**

Amount of Each Receipt this Period  
600.00

CONTRIBUTION

CHARGED BACK \$600.00 ON 06/03/2013

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

Mailing Address 203 #C CASTLEWOOD CT.

City State Zip Code  
MURFREESBORO TN 37129

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

Name of Employer Occupation  
ROSS FINANCIAL PLANNING PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

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

**Transaction ID : SA11.974B**

Amount of Each Receipt this Period  
-600.00

CONTRIBUTION

CHARGED BACK

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

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

2600.00

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

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

FOR LINE NUMBER: PAGE 88 OF 149  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN W. ROSS**

Mailing Address 171 TRENTON HWY

City MILAN State TN Zip Code 38358-6628

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

Name of Employer MILAN EXPRESS Occupation MANAGEMENT

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.808**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

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

Mailing Address 630 MELROSE AVE.

City NASHVILLE State TN Zip Code 37211-2161

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

Name of Employer ELAN-POLO INC. Occupation PRESIDENT & CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.884**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DR. DAVID R. SAIN DDS, MS.**

Mailing Address 1849 MEMORIAL BLVD.

City MURFREESBORO State TN Zip Code 37129-1522

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

Name of Employer SELF-EMPLOYED Occupation DENTIST

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.820**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

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

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

\_\_\_\_\_ 3000.00

\_\_\_\_\_



**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 89 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD H. SAIN**

Mailing Address 2719 JAMES EDMON CT

City MURFREESBORO State TN Zip Code 37129-0876

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

Name of Employer REEVES-SAIN PHARMACY Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.881**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

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

Mailing Address 415 CHURCH ST, APT 3105

City NASHVILLE State TN Zip Code 37219-2308

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

Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2013**

**Transaction ID : SA11.744**

Amount of Each Receipt this Period  
**2000.00**

CONTRIBUTION

SEE REATTRIBUTION

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

Mailing Address 415 CHURCH ST, APT 3105

City NASHVILLE State TN Zip Code 37219-2308

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

Name of Employer BROADWAY ENTERTAINMENT Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2013**

**Transaction ID : SA11.774**

Amount of Each Receipt this Period  
**900.00**

CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION FROM SPOUSE

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

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

**3000.00**

**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 90 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 415 CHURCH ST, APT 3105

City NASHVILLE	State TN	Zip Code 37219-2308
-------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation BUSINESS OWNER
-----------------------------------	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11.744B**

Amount of Each Receipt this Period  
 -900.00

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

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

Mailing Address 2008 VALLEY FORGE CT.

City ARRINGTON	State TN	Zip Code 37014-9745
-------------------	-------------	------------------------

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

Name of Employer ALL OUT LAWN SERVICES	Occupation PARTNER
---	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.890**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

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

Mailing Address 136 BROMLEY PARK LN.

City FRANKLIN	State TN	Zip Code 37069-6510
------------------	-------------	------------------------

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.951**

Amount of Each Receipt this Period  
 8000.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

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

10000.00

**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 91 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>DENISE SMITH</b>		Date of Receipt MM / DD / YYYY 02 / 05 / 2013
Mailing Address 2033 RICHARD JONES RD		<b>Transaction ID : SA11.393O</b>
City NASHVILLE	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200.00
Name of Employer SELF-EMPLOYED	Occupation HAURY AND SMITH	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>DENISE SMITH</b>		Date of Receipt MM / DD / YYYY 04 / 03 / 2013
Mailing Address 2033 RICHARD JONES RD		<b>Transaction ID : SA11.393</b>
City NASHVILLE	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600.00
Name of Employer SELF-EMPLOYED	Occupation HAURY AND SMITH	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	<b>[MEMO ITEM]</b> REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) <b>DENISE SMITH</b>		Date of Receipt MM / DD / YYYY 04 / 03 / 2013
Mailing Address 2033 RICHARD JONES RD		<b>Transaction ID : SA11.526</b>
City NASHVILLE	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer SELF-EMPLOYED	Occupation HAURY AND SMITH	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	<b>[MEMO ITEM]</b> REDESIGNATION FROM PRIMARY

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>REESE SMITH III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 08 / 2013
Mailing Address 2033 RICHARD JONES RD		<b>Transaction ID : SA11.3940</b>
City NASHVILLE	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer HAURY AND SMITH CONTRACTORS	Occupation HOME BUILDER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>REESE SMITH III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 06 / 2013
Mailing Address 2033 RICHARD JONES RD		<b>Transaction ID : SA11.394</b>
City NASHVILLE	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2400.00
Name of Employer HAURY AND SMITH CONTRACTORS	Occupation HOME BUILDER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	<b>[MEMO ITEM]</b> REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial) <b>REESE SMITH III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 06 / 2013
Mailing Address 2033 RICHARD JONES RD		<b>Transaction ID : SA11.528</b>
City NASHVILLE	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer HAURY AND SMITH CONTRACTORS	Occupation HOME BUILDER	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	<b>[MEMO ITEM]</b> REDESIGNATION FROM PRIMARY

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 2033 RICHARD JONES RD

City State Zip Code  
NASHVILLE TN 37215-2896

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

Name of Employer Occupation  
HAURY AND SMITH PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 05 / 2013

**Transaction ID : SA11.395O**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 2033 RICHARD JONES RD

City State Zip Code  
NASHVILLE TN 37215-2896

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

Name of Employer Occupation  
HAURY AND SMITH PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2013

**Transaction ID : SA11.395**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 2033 RICHARD JONES RD

City State Zip Code  
NASHVILLE TN 37215-2896

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

Name of Employer Occupation  
HAURY AND SMITH PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2013

**Transaction ID : SA11.530**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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 94 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS E. SMITH**

Mailing Address 123 N CHURCH ST.

City MURFREESBORO State TN Zip Code 37130-3639

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

Name of Employer: STONEGATE PROPERTIES, LLC Occupation: OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 14 / 2013

**Transaction ID : SA11.652**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

Mailing Address 511 EAST MAIN ST

City MURFREESBORO State TN Zip Code 37130-3938

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

Name of Employer: J. SMYTHE LEASING Occupation: OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 06 / 17 / 2013

**Transaction ID : SA11.723**

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

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

Mailing Address 511 EAST MAIN ST

City MURFREESBORO State TN Zip Code 37130-3938

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

Name of Employer: J. SMYTHE LEASING Occupation: OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 06 / 20 / 2013

**Transaction ID : SA11.723B**

Amount of Each Receipt this Period: -2600.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

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

3600.00

**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 95 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES SMYTHE**

Mailing Address 511 EAST MAIN ST

City MURFREESBORO State TN Zip Code 37130-3938

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

Name of Employer J. SMYTHE LEASING Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 20 / 2013

**Transaction ID : SA11.725**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

Mailing Address 54 MUSIC SQ E, STE 200

City NASHVILLE State TN Zip Code 37203-4360

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

Name of Employer SPALDING ENTERTAINMENT Occupation MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 10 / 2013

**Transaction ID : SA11.593**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

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

Mailing Address 6112 MONTCREST DRIVE

City NASHVILLE State TN Zip Code 37215-5622

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

Name of Employer AT&T Occupation MARKETING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : SA11.776**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

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

3100.00

**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 96 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BOBBY GENE SPIVEY**

Mailing Address 1003 ROSEMONT TERR

City State Zip Code  
SMYRNA TN 37167-6254

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

Name of Employer Occupation  
BGS LIMITED OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2013

**Transaction ID : SA11.403O**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 1003 ROSEMONT TERR

City State Zip Code  
SMYRNA TN 37167-6254

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

Name of Employer Occupation  
BGS LIMITED OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2013

**Transaction ID : SA11.403**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 1003 ROSEMONT TERR

City State Zip Code  
SMYRNA TN 37167-6254

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

Name of Employer Occupation  
BGS LIMITED OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2013

**Transaction ID : SA11.502**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**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: PAGE 97 OF 149  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KIMBERLY L. SPIVEY**  
 Mailing Address 1523 CORNERSVILLE HWY.  
 City State Zip Code  
 LEWISBURG TN 37091-5109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WALKER DIE CASTING MAINTENANCE MANAGER  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : SA11.868**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VIRGINIA L. STEWART**  
 Mailing Address P.O. BOX 144  
 City State Zip Code  
 BELL BUCKLE TN 37020-0144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF EMPLOYED FARMING  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 17 / 2013  
**Transaction ID : SA11.782**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN STITES II**  
 Mailing Address 1843 FORMAN DR  
 City State Zip Code  
 COOKEVILLE TN 38501-5933  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 J&S CONSTRUCTION CO. INC CONSTRUCTION  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 10 / 2013  
**Transaction ID : SA11.594**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

1800.00

**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 98 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TARA WHITE STONE**

Mailing Address 5333 SAINT IVES DR.

City MURFREESBORO State TN Zip Code 37128-2735

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

Name of Employer COOKE REALTY PARTNERS Occupation BUSINESS DEVELOPMENT COORDINATOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.870**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HARRY WES STOWERS JR.**

Mailing Address 8733 INLET DR

City KNOXVILLE State TN Zip Code 37922-6459

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

Name of Employer STOWES MACHINERY COPORATION Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2013

**Transaction ID : SA11.4100**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 8733 INLET DR

City KNOXVILLE State TN Zip Code 37922-6459

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

Name of Employer STOWERS MACHINERY Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 09 / 2013

**Transaction ID : SA11.507**

Amount of Each Receipt this Period  
 2400.00

CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION FROM SPOUSE

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HARRY WES STOWERS JR.**

Mailing Address 8733 INLET DR

City State Zip Code  
KNOXVILLE TN 37922-6459

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

Name of Employer Occupation  
STOWES MACHINERY COPORATION EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 09 / 2013

**Transaction ID : SA11.508**

Amount of Each Receipt this Period  
-2400.00

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

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

Mailing Address 307 MEADOWGLADE LN.

City State Zip Code  
FRANKLIN TN 37064-4794

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

Name of Employer Occupation  
WALKER DUNLOP VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.873**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 812 EMBARCADERO RD.

City State Zip Code  
KNOXVILLE TN 37923-1932

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

Name of Employer Occupation  
GEO/ENVIRONMENTAL ASSOCIATES CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : SA11.751**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**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 100 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 310 MULBERRY AVE.

City FAYETTEVILLE State TN Zip Code 37334-2624

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : SA11.705**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 13 NOLAND DR

City FAYETTEVILLE State TN Zip Code 37334-6480

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

Name of Employer EXCHANGE, INC. Occupation MEDIA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2013

**Transaction ID : SA11.780**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 306 BETHANY LN

City SHELBYVILLE State TN Zip Code 37160-3454

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

Name of Employer SELF-EMPLOYED Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 10 / 2013

**Transaction ID : SA11.589**

Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

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

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

800.00

**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 101 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 108 CLOVERDALE RD.

City State Zip Code  
SHELBYVILLE TN 37160-2104

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

Name of Employer Occupation  
N/A RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.961**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

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

Mailing Address 117 SANDERS ST.

City State Zip Code  
SHELBYVILLE TN 37160-4846

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

Name of Employer Occupation  
SHELBYVILLE TN FIRE DEPARTMENT FIREFIGHTER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.963**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

Mailing Address 108 CLOVERDALE RD.

City State Zip Code  
SHELBYVILLE TN 37160-2104

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

Name of Employer Occupation  
N/A RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.960**

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

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

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

11400.00

**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 102 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address **PO BOX 332490**

City **MURFREESBORO** State **TN** Zip Code **37133-2490**

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

Name of Employer **JIM TRACY INSURANCE AGENCY** Occupation **PARTNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.962**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

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

Mailing Address **1585?LYONS BEND RD**

City **KNOXVILLE** State **TN** Zip Code **37919**

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

Name of Employer **TURKEY CREEK LAND PARTNERS** Occupation **CHIEF MANAGER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 17 / 2013**

**Transaction ID : SA11.551**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address **2317 GOLF CLUB LN**

City **NASHVILLE** State **TN** Zip Code **37215-1107**

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

Name of Employer **KLEVER RECORDS** Occupation **MUSIC DEVELOPMENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 17 / 2013**

**Transaction ID : SA11.538**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**4600.00**

**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 103 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JACK B. TURNER CLU**

Mailing Address **PO BOX 627**

City **CLARKSVILLE** State **TN** Zip Code **37041-0627**

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

Name of Employer **JACK B. TURNER & ASSOCIATES, INC** Occupation **FINANCIAL SERVICES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 31 / 2013**

**Transaction ID : SA11.635**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

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

Mailing Address **2000 MALLORY LN, STE 130-372**

City **FRANKLIN** State **TN** Zip Code **37067-8209**

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

Name of Employer **UNIHOST, INC** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 10 / 2013**

**Transaction ID : SA11.592**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

Mailing Address **116 NOBLETT AVE.**

City **FAYETTEVILLE** State **TN** Zip Code **37334-7213**

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

Name of Employer **FAYETTEVILLE** Occupation **MAYOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 19 / 2013**

**Transaction ID : SA11.717**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**1750.00**

**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 104 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 2508 BELFAST CT.

City MURFREESBORO State TN Zip Code 37129-1341

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

Name of Employer NATIONAL HEALTH INVESTORS Occupation DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.827**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 6594 BROWNS MILL RD

City LASCASSAS State TN Zip Code 37085-4625

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

Name of Employer SELF Occupation AGENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : SA11.692**

Amount of Each Receipt this Period  
 1250.00

CONTRIBUTION

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

Mailing Address 113 PAGE ROAD

City NASHVILLE State TN Zip Code 37205-4421

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

Name of Employer VAUGHN DEVELOPMENT GROUP, INC. Occupation AFFORDABLE HOUSING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2013

**Transaction ID : SA11.777**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

3250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RUSTE VIA**

Mailing Address 1633 VIA RD.

City <b>BELLS</b>	State <b>TN</b>	Zip Code <b>38006-3015</b>
----------------------	--------------------	-------------------------------

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

Name of Employer <b>EXECUTIVE</b>	Occupation <b>CHRISTIAN FAMILY MEDICINE, INC.</b>
--------------------------------------	--

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		30		2013

**Transaction ID : SA11.919**

Amount of Each Receipt this Period  

5200.00
---------

CONTRIBUTION

REDESIGNATION/REATTRIBUTION REQUESTED

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

Mailing Address 934 BATTERY LN.

City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code <b>37220-1150</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer <b>BASS, BERRY &amp; SIMS</b>	Occupation <b>ATTORNEY</b>
---	-------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		19		2013

**Transaction ID : SA11.690**

Amount of Each Receipt this Period  

250.00
--------

CONTRIBUTION

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

Mailing Address 3451 RED OAK TRAIL

City <b>MURFREESBORO</b>	State <b>TN</b>	Zip Code <b>37130-6895</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer <b>NATIONAL HEALTH INVESTORS</b>	Occupation <b>FINANCIAL REPORTING MANAGER</b>
--	--

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		18		2013

**Transaction ID : SA11.783**

Amount of Each Receipt this Period  

250.00
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CONTRIBUTION

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

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

5700.00
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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 106 OF 149  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMY WALDEN**

Mailing Address **248 WEST BROW RD.**

City **LOOKOUT MOUNTAIN** State **TN** Zip Code **37350-1310**

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

Name of Employer **WALDEN SECURITY** Occupation **OWNER**

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  
**05 / 03 / 2013**

**Transaction ID : SA11.574**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

Mailing Address **411 FORREST ST.**

City **LEWISBURG** State **TN** Zip Code **37091-3738**

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

Name of Employer **WALKER DIE CAST** Occupation **OWNER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.964**

Amount of Each Receipt this Period  
**5200.00**  
 CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

Mailing Address **1807 SE BROAD ST.**

City **MURFREESBORO** State **TN** Zip Code **37130-5945**

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

Name of Employer **COLDWELL BANKER SNOW & WALL** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.952**

Amount of Each Receipt this Period  
**1600.00**  
 CONTRIBUTION

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

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

**9300.00**

**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 107 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SALLY S. WALL**

Mailing Address 1807 SE BROAD ST.

City MURFREESBORO State TN Zip Code 37130-5945

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.955**

Amount of Each Receipt this Period  
 2600.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DR. MING WANG MD**

Mailing Address 1801 WEST END AVENUE, STE 1150

City NASHVILLE State TN Zip Code 37203-2528

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

Name of Employer WANG VISION Occupation DOCTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.886**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 257 ELDAD RD.

City FAYETTEVILLE State TN Zip Code 37334-7361

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : SA11.711**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

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

4100.00

**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 108 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES E. WEST**

Mailing Address 205 DUNCAN DR.

City MARYVILLE State TN Zip Code 37803-6555

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

Name of Employer SELF EMPLOYED Occupation BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.958**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 1516 WILLIAMSPORT PIKE

City COLUMBIA State TN Zip Code 38401-5627

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

Name of Employer OFFICE PRODUCTS Occupation BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2013

**Transaction ID : SA11.788**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 3316 STILLCORN RIDGE RD

City COLUMBIA State TN Zip Code 38401-5956

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

Name of Employer FIRST FARMERS & MERCHANT BANK Occupation DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2013

**Transaction ID : SA11.749**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

1500.00

**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 109 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LORI WHIPPLE**

Mailing Address 390 GLENDOWER PL.

City FRANKLIN State TN Zip Code 37064-8947

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.889**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 1522 RIVERVIEW DR.

City MURFREESBORO State TN Zip Code 37129-6015

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

Name of Employer STATE OF TENNESSEE Occupation STATE REPRESENTATIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.819**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 3689 STONECREEK DR.

City SPRING HILL State TN Zip Code 37174-2198

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

Name of Employer DECKER WEALTH MANAGEMENT Occupation INVESTMENT REPRESENTATIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.959**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

1750.00

**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 110 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS H. WHITE III**

Mailing Address **PO BOX 23287**

City **CHATTANOOGA** State **TN** Zip Code **37422-3287**

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

Name of Employer **PROGRESS RAIL SERVICES** Occupation **QUALITY MANAGER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 03 / 2013**

**Transaction ID : SA11.575**

Amount of Each Receipt this Period  
**350.00**  
 CONTRIBUTION

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

Mailing Address **4012 SHENANDOAH DRIVE**

City **COLUMBIA** State **TN** Zip Code **38401-5314**

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

Name of Employer **JONES AND LANG SPORTING GOODS** Occupation **VP**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2013**

**Transaction ID : SA11.803**

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

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

Mailing Address **3899 ALBERT MATTHEWS RD**

City **COLUMBIA** State **TN** Zip Code **38401-8961**

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

Name of Employer **MID TENNESSEE BONE & JOINT CLINIC** Occupation **PHYSICIAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 17 / 2013**

**Transaction ID : SA11.544**

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

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HAL WILLIFORD**

Mailing Address 10256 W SHREWSBURY RUN

City State Zip Code  
COLLIERVILLE TN 38017-0850

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

Name of Employer Occupation  
MEMPHIS STONE & GRAVEL PRESIDENT/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2013

**Transaction ID : SA11.680**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 6 N PUBLIC SQ.

City State Zip Code  
MURFREESBORO TN 37130-3633

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY AT LAW

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2013

**Transaction ID : SA11.656**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 1939 GREEN HILLS BLVD

City State Zip Code  
FRANKLIN TN 37067-8146

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

Name of Employer Occupation  
WILSON AND ASSOCIATES PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2013

**Transaction ID : SA11.650**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>BUCKLEY WINFREE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2013
Mailing Address 2933 CHERRY BLOSSOM LN.		<b>Transaction ID : SA11.829</b>
City MURFREESBORO	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer NATIONAL HEALTH CORP.	Occupation ADMINISTRATOR	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) <b>JESSICA A. WINFREE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2013
Mailing Address 2933 CHERRY BLOSSOM LN.		<b>Transaction ID : SA11.816</b>
City MURFREESBORO	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer N/A	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00	REDESIGNATION/REATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial) <b>TIMOTHY J. WITT</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2013
Mailing Address 224 W. NEW ST.		<b>Transaction ID : SA11.793</b>
City KINGSPORT	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer EDWARDS TIPTON WITT AGENCY	Occupation BUSINESS OWNER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5700.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK WOOD**

Mailing Address 2904 S GREENWOOD DR

City JOHNSON CITY State TN Zip Code 37604-3210

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

Name of Employer HOLSTON DISTRIBUTING COMPANY Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11.786**

Amount of Each Receipt this Period  
 750.00  
 CONTRIBUTION

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

Mailing Address 1135 BRENTWOOD POINT

City KINGSTON State TN Zip Code 37763-3143

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

Name of Employer ROANE COUNTY INDUSTRIAL PARK Occupation MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.866**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 111 MCNEW DR.

City HARRIMAN State TN Zip Code 37748-7312

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

Name of Employer ROANE STATE COMMUNITY COLLEGE Occupation PROFESSOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.841**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

2250.00

**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 114 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JON YARBROUGH**

Mailing Address 308 MALLORY STATION RD

City FRANKLIN State TN Zip Code 37067-8210

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

Name of Employer VGT-VIDEO GAMING TECHNOLOGIES, INC Occupation FOUNDER/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 26 / 2013**

**Transaction ID : SA11.745**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

Mailing Address 3419 MEADOWCREST DR.

City MURFREESBORO State TN Zip Code 37129-0836

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

Name of Employer MURFREESBORO PURE MILK CO Occupation VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : SA11.840**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ADAMS CONSULTING GROUP, LLC**

Mailing Address 1211 LEWISBURG PIKE

City FRANKLIN State TN Zip Code 37064-5036

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11.679**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**2000.00**

**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 115 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BURR & FORMAN, LLP**

Mailing Address 420 N 20TH STREET, STE 3400

City BIRMINGHAM State AL Zip Code 35203-5210

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  
 06 / 30 / 2013

**Transaction ID : SA11.917**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address PO BOX 561

City SAVANNAH State TN Zip Code 38372-0561

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

Name of Employer Occupation  
 SELF-EMPLOYED REAL ESTATE INVESTMENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2013

**Transaction ID : SA11.553**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address P.O. BOX 561

City SAVANNAH State TN Zip Code 38372-0561

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  
 03 / 17 / 2013

**Transaction ID : SA11.73**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**[MEMO ITEM]**  
 SEE ATTRIBUTION BELOW

**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 116 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DELTA WHOLESALE LIQUORS**

Mailing Address 802 ROZELLE

City MEMPHIS State TN Zip Code 38104-5052

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013

**Transaction ID : SA11.765**

Amount of Each Receipt this Period  
 350.00

CONTRIBUTION

REFUNDED \$350.00 ON 06/27/2013

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

Mailing Address 2217 BATTLEGROUND DR.

City MURFREESBORO State TN Zip Code 37129-6006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.824**

Amount of Each Receipt this Period  
 5200.00

CONTRIBUTION

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

Mailing Address 2217 BATTLEGROUND DR.

City MURFREESBORO State TN Zip Code 37129-6006

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

Name of Employer Occupation  
 HIT PARTNERS EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11.836**

Amount of Each Receipt this Period  
 2600.00

CONTRIBUTION

**[MEMO ITEM]**

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

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

5550.00

**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 117 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HIT PARTNERS**

Mailing Address 2217 BATTLEGROUND DR.

City MURFREESBORO State TN Zip Code 37129-6006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11.824B**

Amount of Each Receipt this Period  
 -2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 2217 BATTLEGROUND DR.

City MURFREESBORO State TN Zip Code 37129-6006

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

Name of Employer Occupation  
HIT PARTNERS EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : SA11.835**

Amount of Each Receipt this Period  
 2600.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 2217 BATTLEGROUND DR.

City MURFREESBORO State TN Zip Code 37129-6006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : SA11.833**

Amount of Each Receipt this Period  
 2600.00

CONTRIBUTION

**[MEMO ITEM]**  
SEE ATTRIBUTION BELOW

**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 118 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HORIZON WINE & SPIRITS**

Mailing Address 3851 INDUSTRIAL PKWY

City NASHVILLE State TN Zip Code 37218-3629

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : SA11.764**

Amount of Each Receipt this Period  
 350.00

CONTRIBUTION

REFUNDED \$350.00 ON 06/27/2013

**B.** Full Name (Last, First, Middle Initial)  
**HORIZON WINE & SPIRITS**

Mailing Address 3794 TAG RD.

City CHATTANOOGA State TN Zip Code 37416-3813

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : SA11.766**

Amount of Each Receipt this Period  
 350.00

CONTRIBUTION

REFUNDED \$350.00 ON 06/27/2013

**C.** Full Name (Last, First, Middle Initial)  
**JIM TRACY STATE SENATE**

Mailing Address PO BOX 332166

City MURFREESBORO State TN Zip Code 37133-2166

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : SA11.920**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

1700.00

**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 119 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DENA LANDERS**

Mailing Address 102 ASHE RD.

City State Zip Code  
SHELBYVILLE TN 37160-3784

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

Name of Employer Occupation  
MERLE NORMAN COSMETICS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 23 / 2013

**Transaction ID : SA11.557**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 102 ASHE RD.

City State Zip Code  
SHELBYVILLE TN 37160-3784

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

Name of Employer Occupation  
SELF-EMPLOYED DRILLING CONTRACTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 23 / 2013

**Transaction ID : SA11.556**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 102 ASHE RD

City State Zip Code  
SHELBYVILLE TN 37160-3784

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 07 / 2013

**Transaction ID : SA11.248**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**[MEMO ITEM]**  
SEE ATTRIBUTION BELOW

**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 120 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RANDALL E. MATLOCK**

Mailing Address 151 HERITAGE PARK DR, STE 201

City MURFREESBORO	State TN	Zip Code 37129-0505
----------------------	-------------	------------------------

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

Name of Employer RANDALL MATLOCK & ASSOCIATES, PC	Occupation CPA
--	-------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2013

**Transaction ID : SA11.554**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**RANDALL MATLOCK & ASSOCIATES**

Mailing Address 151 HERITAGE PARK DR, STE 201

City MURFREESBORO	State TN	Zip Code 37129-0505
----------------------	-------------	------------------------

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

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

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2013

**Transaction ID : SA11.343**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**[MEMO ITEM]**  
SEE ATTRIBUTION BELOW

**C.** Full Name (Last, First, Middle Initial)  
**STAR DISTRIBUTORS COMPANY WHOLESALE LIQUORS & WINE**

Mailing Address 6290 SHELBY VIEW DR.

City MEMPHIS	State TN	Zip Code 38134-7662
-----------------	-------------	------------------------

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

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

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : SA11.611**

Amount of Each Receipt this Period  
350.00

CONTRIBUTION

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

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

350.00



**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 121 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THE HAND FAMILY BEVERAGE COMPANY, LLC BUDWEISER OF MEMPHIS**

Mailing Address **PO BOX 30789**

City **CLARKSVILLE** State **TN** Zip Code **37040-0014**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : SA11.647**

Amount of Each Receipt this Period  
**2000.00**  
 CONTRIBUTION

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

Mailing Address **PO BOX 103**

City **SHELBYVILLE** State **TN** Zip Code **37162-0103**

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

Name of Employer Occupation  
**THE LAW OFFICES OF C.KELLY WILSON** **SELF-EMPLOYED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 22 / 2013**

**Transaction ID : SA11.555**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**THE LAW OFFICES OF C. KELLY WILSON**

Mailing Address **P.O. BOX 103**

City **SHELBYVILLE** State **TN** Zip Code **37162-0103**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 17 / 2013**

**Transaction ID : SA11.421**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION  
**[MEMO ITEM]**  
 SEE ATTRIBUTION BELOW

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

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

**2000.00**

**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 122 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VANHOOSER DAIRY**

Mailing Address 3400 OSTELLA RD.

City: CORNERSVILLE    State: TN    Zip Code: 37047-5253

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: 06 / 30 / 2013

**Transaction ID : SA11.895**

Amount of Each Receipt this Period: 200.00

CONTRIBUTION

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

Mailing Address 3400 OSTELLA RD.

City: CORNERSVILLE    State: TN    Zip Code: 37047-5253

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: 06 / 30 / 2013

**Transaction ID : SA11.896**

Amount of Each Receipt this Period: 200.00

CONTRIBUTION

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

Mailing Address

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For:  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_

Date of Receipt

Amount of Each Receipt this Period

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

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

400.00

271800.00

**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 123 OF 149
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MASSEY FOR SENATE**

Mailing Address 6932 WESTLAND DR.

City State Zip Code  
KNOXVILLE TN 37919-7435

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  
 06 / 27 / 2013

**Transaction ID : SA11.830**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**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).....

1000.00

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ART SWANN COMMITTEE**

Mailing Address 1507 S COURT ST

City MARYVILLE State TN Zip Code 37803-6510

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  
 04 / 17 / 2013

**Transaction ID : SA11.543**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BUILD PAC # 1163**

Mailing Address 7990 TRINITY RD, STE 110

City CORDOVA State TN Zip Code 38018-7732

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  
 06 / 14 / 2013

**Transaction ID : SA11.673**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LUNDBERG FOR HOUSE DISTRICT 1**

Mailing Address 212 SKYLINE DR

City BRISTOL State TN Zip Code 37620-4141

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  
 04 / 17 / 2013

**Transaction ID : SA11.539**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address **20 BURTON HILLS BLVD, 5TH FLR**

City **NASHVILLE** State **TN** Zip Code **37215-6197**

FEC ID number of contributing federal political committee. **C C00484410**

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  
**05 / 31 / 2013**

**Transaction ID : SA11.643**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address **451 FLORIDA BLVD.  
PREMIER TOWER, 19TH FLR**

City **BATON ROUGE** State **LA** Zip Code **70801-1700**

FEC ID number of contributing federal political committee. **C C00226472**

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  
**05 / 31 / 2013**

**Transaction ID : SA11.642**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FARMERS GROUP, INC. PAC**

Mailing Address **2350 KERNER BLVD, STE 250**

City **SAN RAFAEL** State **CA** Zip Code **94901-5596**

FEC ID number of contributing federal political committee. **C C00135681**

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  
**06 / 21 / 2013**

**Transaction ID : SA11.731**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

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

4500.00

**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 126 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

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

Mailing Address 330 FRANKLIN RD, 135A-178

City State Zip Code  
BRENTWOOD TN 37027-3280

FEC ID number of contributing federal political committee. **C C00271171**

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  
 06 / 30 / 2013

**Transaction ID : SA11.921**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE SERVICEMASTER CO. PAC- SERVEPAC**

Mailing Address 860 RIDGE LAKE BLVD.

City State Zip Code  
MEMPHIS TN 38120-9434

FEC ID number of contributing federal political committee. **C C00331363**

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  
 06 / 26 / 2013

**Transaction ID : SA11.763**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 52 WEST 8TH STREET

City State Zip Code  
PARSONS TN 38363-4656

FEC ID number of contributing federal political committee. **C C00484964**

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  
 06 / 19 / 2013

**Transaction ID : SA11.688**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

3000.00

**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 127 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VULCAN MATERIALS COMPANY PAC**

Mailing Address **PO BOX 385014**

City **BIRMINGHAM** State **AL** Zip Code **35238-5014**

FEC ID number of contributing federal political committee. **C C00116020**

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  
**04 / 17 / 2013**

**Transaction ID : SA11.552**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WORLD ACCEPTANCE CORPORATION PAC**

Mailing Address **PO BOX 6429**

City **GREENVILLE** State **SC** Zip Code **29606-6429**

FEC ID number of contributing federal political committee. **C C00370577**

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  
**04 / 17 / 2013**

**Transaction ID : SA11.540**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

**TOTAL** This Period (last page this line number only).....

1500.00

11500.00

**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 128 OF 149
	<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)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>JIM TRACY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>06 / 30 / 2013</b>
Mailing Address <b>PO BOX 332490</b>		<b>Transaction ID : SA11.950</b>
City <b>MURFREESBORO</b>	State <b>TN</b> Zip Code <b>37133-2490</b>	
FEC ID number of contributing federal political committee. <b>C H0TN06240</b>		Amount of Each Receipt this Period <b>7300.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>INSURANCE</b>	<b>CONTRIBUTION</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>7800.00</b>	<b>CONTRIBUTIONS FROM PERSONAL FUNDS</b>

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>7300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>7300.00</b>



**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 129 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement MM / DD / YYYY <b>04 / 02 / 2013</b>
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 999,999.99 <b>798.00</b>
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement DATABASE MANAGEMENT SERVICE	
Candidate Name		<b>Transaction ID : SB17.154</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement MM / DD / YYYY <b>05 / 02 / 2013</b>
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 999,999.99 <b>798.00</b>
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement DATABASE MANAGEMENT SERVICE	
Candidate Name		<b>Transaction ID : SB17.155</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement MM / DD / YYYY <b>06 / 04 / 2013</b>
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 999,999.99 <b>798.00</b>
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement DATABASE MANAGEMENT SERVICE	
Candidate Name		<b>Transaction ID : SB17.156</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	999,999.99 <b>2394.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	999,999.99

**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 130 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. COMPLIANCE CONSULTING COMPANY OF VA LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 03 / 2013</b>
Mailing Address <b>PO BOX 365</b>		Amount of Each Disbursement this Period <b>4575.00</b>
City <b>MCLEAN</b>	State <b>VA</b>	
Zip Code <b>22101</b>	Purpose of Disbursement <b>COMPLIANCE CONSULTING</b>	<b>Transaction ID : SB17.126</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. COMPLIANCE CONSULTING COMPANY OF VA LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 08 / 2013</b>
Mailing Address <b>PO BOX 365</b>		Amount of Each Disbursement this Period <b>1525.00</b>
City <b>MCLEAN</b>	State <b>VA</b>	
Zip Code <b>22101</b>	Purpose of Disbursement <b>COMPLIANCE CONSULTING</b>	<b>Transaction ID : SB17.127</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. COMPLIANCE CONSULTING COMPANY OF VA LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 03 / 2013</b>
Mailing Address <b>PO BOX 365</b>		Amount of Each Disbursement this Period <b>1525.00</b>
City <b>MCLEAN</b>	State <b>VA</b>	
Zip Code <b>22101</b>	Purpose of Disbursement <b>COMPLIANCE CONSULTING</b>	<b>Transaction ID : SB17.128</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>7625.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. HARRIS MEDIA LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 17 / 2013</b>
Mailing Address <b>611 S CONGRESS AVE STE 400</b>		Amount of Each Disbursement this Period <b>12875.00</b> <b>Transaction ID : SB17.179</b>
City <b>AUSTIN</b> State <b>TX</b> Zip Code <b>78704</b>	Purpose of Disbursement <b>WEB SERVICE</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ICONTACT CORPORATION</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 16 / 2013</b>
Mailing Address <b>2450 PERIMETER PARK DR STE 105</b>		Amount of Each Disbursement this Period <b>23.95</b> <b>Transaction ID : SB17.176</b>
City <b>MORRISVILLE</b> State <b>NC</b> Zip Code <b>27560</b>	Purpose of Disbursement <b>WEB SERVICE</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ICONTACT CORPORATION</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2013</b>
Mailing Address <b>2450 PERIMETER PARK DR STE 105</b>		Amount of Each Disbursement this Period <b>12922.69</b> <b>Transaction ID : SB17.177</b>
City <b>MORRISVILLE</b> State <b>NC</b> Zip Code <b>27560</b>	Purpose of Disbursement <b>WEB SERVICE</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>12922.69</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. ICONTACT CORPORATION</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2013
Mailing Address 2450 PERIMETER PARK DR STE 105		Amount of Each Disbursement this Period 39.92
City MORRISVILLE State NC Zip Code 27560	Purpose of Disbursement WEB SERVICE	
Candidate Name	Category/Type	Transaction ID : SB17.178
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ICONTACT CORPORATION</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address 2450 PERIMETER PARK DR STE 105		Amount of Each Disbursement this Period 92.50
City MORRISVILLE State NC Zip Code 27560	Purpose of Disbursement WEB SERVICE	
Candidate Name	Category/Type	Transaction ID : SB17.180
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOYNER &amp; HOGAN PRINTERS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 600 MAIN ST PO BOX 60069		Amount of Each Disbursement this Period 65.55
City NASHVILLE State TN Zip Code 37206	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.164
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	197.97
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 149			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. JOYNER &amp; HOGAN PRINTERS</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013	
Mailing Address 600 MAIN ST PO BOX 60069			Amount of Each Disbursement this Period 644.75	
City NASHVILLE	State TN	Zip Code 37206	Transaction ID : SB17.165	
Purpose of Disbursement PRINTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. JOYNER &amp; HOGAN PRINTERS</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013	
Mailing Address 600 MAIN ST PO BOX 60069			Amount of Each Disbursement this Period 1575.72	
City NASHVILLE	State TN	Zip Code 37206	Transaction ID : SB17.166	
Purpose of Disbursement PRINTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. JOYNER &amp; HOGAN PRINTERS</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013	
Mailing Address 600 MAIN ST PO BOX 60069			Amount of Each Disbursement this Period 402.42	
City NASHVILLE	State TN	Zip Code 37206	Transaction ID : SB17.167	
Purpose of Disbursement PRINTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2622.89
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. JOYNER &amp; HOGAN PRINTERS</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2013	
Mailing Address 600 MAIN ST PO BOX 60069			Amount of Each Disbursement this Period 92.86	
City NASHVILLE	State TN	Zip Code 37206	Transaction ID : SB17.168	
Purpose of Disbursement PRINTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PARKING MANAGEMENT COMPANY</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2013	
Mailing Address 306 42ND AVE NORTH			Amount of Each Disbursement this Period 634.75	
City NASHVILLE	State TN	Zip Code 37209	Transaction ID : SB17.162	
Purpose of Disbursement PARKING SERVICE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013	
Mailing Address 144 2ND ST 1ST FL			Amount of Each Disbursement this Period 45.00	
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.129	
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	772.61
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 149			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 135.00
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	<b>Transaction ID : SB17.130</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 15.75
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	<b>Transaction ID : SB17.131</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 22.50
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	<b>Transaction ID : SB17.132</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	173.25
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 33.75
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.133
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 67.50
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.134
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 11.25
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.135
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	112.50
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 137 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 25 / 2013</b>
Mailing Address <b>144 2ND ST 1ST FL</b>		Amount of Each Disbursement this Period <b>15.75</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<b>Transaction ID : SB17.136</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 29 / 2013</b>
Mailing Address <b>144 2ND ST 1ST FL</b>		Amount of Each Disbursement this Period <b>4.50</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<b>Transaction ID : SB17.137</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 14 / 2013</b>
Mailing Address <b>144 2ND ST 1ST FL</b>		Amount of Each Disbursement this Period <b>0.45</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<b>Transaction ID : SB17.138</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>20.70</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 2.26
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.139
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 4.50
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.140
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 45.00
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.141
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	51.76
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 11.25
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.142
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 17.92
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.143
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 10.13
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.144
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	39.30
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 12 / 2013</b>
Mailing Address <b>144 2ND ST 1ST FL</b>		Amount of Each Disbursement this Period <b>67.50</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<b>Transaction ID : SB17.145</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 14 / 2013</b>
Mailing Address <b>144 2ND ST 1ST FL</b>		Amount of Each Disbursement this Period <b>5.63</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<b>Transaction ID : SB17.146</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2013</b>
Mailing Address <b>144 2ND ST 1ST FL</b>		Amount of Each Disbursement this Period <b>11.25</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<b>Transaction ID : SB17.147</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>84.38</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 20 / 2013</b>
Mailing Address <b>144 2ND ST 1ST FL</b>		Amount of Each Disbursement this Period <b>22.50</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<b>Transaction ID : SB17.148</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 21 / 2013</b>
Mailing Address <b>144 2ND ST 1ST FL</b>		Amount of Each Disbursement this Period <b>45.00</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<b>Transaction ID : SB17.149</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 25 / 2013</b>
Mailing Address <b>144 2ND ST 1ST FL</b>		Amount of Each Disbursement this Period <b>67.50</b>
City <b>SAN FRANCISCO</b>	State <b>CA</b>	
Zip Code <b>94105</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<b>Transaction ID : SB17.150</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>135.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 11.25
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.151
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 24.75
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.152
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PIRYX</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2013
Mailing Address 144 2ND ST 1ST FL		Amount of Each Disbursement this Period 11.25
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Transaction ID : SB17.153
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	47.25
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 143 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. RACHEL BARRETT &amp; COMPANY LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 25 / 2013</b>
Mailing Address <b>611 COMMERCE ST STE 2927</b>		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : SB17.158</b>
City <b>NASHVILLE</b> State <b>TN</b> Zip Code <b>37203</b>	Purpose of Disbursement <b>FINANCE CONSULTING</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RACHEL BARRETT &amp; COMPANY LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 25 / 2013</b>
Mailing Address <b>611 COMMERCE ST STE 2927</b>		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : SB17.159</b>
City <b>NASHVILLE</b> State <b>TN</b> Zip Code <b>37203</b>	Purpose of Disbursement <b>FINANCE CONSULTING</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RACHEL BARRETT &amp; COMPANY LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 04 / 2013</b>
Mailing Address <b>611 COMMERCE ST STE 2927</b>		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : SB17.160</b>
City <b>NASHVILLE</b> State <b>TN</b> Zip Code <b>37203</b>	Purpose of Disbursement <b>FINANCE CONSULTING</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>15000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 144 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. RACHEL BARRETT &amp; COMPANY LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 17 / 2013</b>
Mailing Address <b>611 COMMERCE ST STE 2927</b>		Amount of Each Disbursement this Period <b>126.70</b>
City <b>NASHVILLE</b> State <b>TN</b> Zip Code <b>37203</b>	Purpose of Disbursement <b>OFFICE SUPPLIES</b>	
Candidate Name		<b>Transaction ID : SB17.161</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 06 / 2013</b>
Mailing Address <b>2702 LOVE FIELD DR.</b>		Amount of Each Disbursement this Period <b>320.30</b>
City <b>DALLAS</b> State <b>TX</b> Zip Code <b>75235</b>	Purpose of Disbursement <b>TRAVEL</b>	
Candidate Name		<b>Transaction ID : SB17.169</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 06 / 2013</b>
Mailing Address <b>2702 LOVE FIELD DR.</b>		Amount of Each Disbursement this Period <b>12.50</b>
City <b>DALLAS</b> State <b>TX</b> Zip Code <b>75235</b>	Purpose of Disbursement <b>TRAVEL</b>	
Candidate Name		<b>Transaction ID : SB17.170</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>459.50</b>
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address 2702 LOVE FIELD DR.		Amount of Each Disbursement this Period 12.50
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL	
Candidate Name		<b>Transaction ID : SB17.171</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2013
Mailing Address 2702 LOVE FIELD DR.		Amount of Each Disbursement this Period 320.30
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL	
Candidate Name		<b>Transaction ID : SB17.172</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2013
Mailing Address 2702 LOVE FIELD DR.		Amount of Each Disbursement this Period 12.50
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL	
Candidate Name		<b>Transaction ID : SB17.173</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	345.30
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2013
Mailing Address 2702 LOVE FIELD DR.		Amount of Each Disbursement this Period 12.50
City DALLAS State TX Zip Code 75235	Purpose of Disbursement TRAVEL	
Candidate Name		Transaction ID : SB17.174
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. THE SOUTHERN</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2013
Mailing Address 150 3RD AVE S #110		Amount of Each Disbursement this Period 767.75
City NASHVILLE State TN Zip Code 37201	Purpose of Disbursement CATERING	
Candidate Name		Transaction ID : SB17.124
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C.</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		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	780.25
<b>TOTAL</b> This Period (last page this line number only).....	43784.35

**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 147 OF 149	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. CITIZENS FOR MCNALLY</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 94 ROYAL TROON CIRCLE		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB20C.457</b>
City OAK RIDGE State TN Zip Code 37830	Purpose of Disbursement CONTRIBUTION REFUND	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. COMMITTEE TO RE-ELECT VINCE DEAN</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address PO BOX 9921		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB20C.461</b>
City EAST RIDGE State TN Zip Code 37412	Purpose of Disbursement CONTRIBUTION REFUND	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF SENATOR MARK NORRIS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address PO BOX 381075		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB20C.460</b>
City GERMANTOWN State TN Zip Code 38183	Purpose of Disbursement CONTRIBUTION REFUND	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 148 OF 149	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS TO ELECT STEVE SOUTHERLAND</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 29 / 2013</b>
Mailing Address <b>4648 HARBOR DR</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB20C.459</b>
City <b>MORRISTOWN</b> State <b>TN</b> Zip Code <b>37814</b>	Purpose of Disbursement <b>CONTRIBUTION REFUND</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOHNSON FOR STATE SENATE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 29 / 2013</b>
Mailing Address <b>330 FRANKLIN RD STE 135A-17B</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB20C.458</b>
City <b>BRENTWOOD</b> State <b>TN</b> Zip Code <b>37027</b>	Purpose of Disbursement <b>CONTRIBUTION REFUND</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RAMSEY FOR GOVERNOR COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 29 / 2013</b>
Mailing Address <b>PO BOX 331309</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : SB20C.456</b>
City <b>NASHVILLE</b> State <b>TN</b> Zip Code <b>37203</b>	Purpose of Disbursement <b>CONTRIBUTION REFUND</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 149	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Jim Tracy for Congress**

Full Name (Last, First, Middle Initial) <b>A. DELTA WHOLESale LIQUORS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2013</b>
Mailing Address <b>802 ROZELLE ST</b>		Amount of Each Disbursement this Period <b>350.00</b> <b>Transaction ID : SB20C.462</b>
City <b>MEMPHIS</b> State <b>TN</b> Zip Code <b>38104</b>	Purpose of Disbursement <b>CONTRIBUTION REFUND</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HORIZON WINE &amp; SPIRITS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2013</b>
Mailing Address <b>3851 INDUSTRIAL PKWY</b>		Amount of Each Disbursement this Period <b>700.00</b> <b>Transaction ID : SB20C.463</b>
City <b>NASHVILLE</b> State <b>TN</b> Zip Code <b>37218</b>	Purpose of Disbursement <b>CONTRIBUTION REFUND</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1050.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>7050.00</b>