

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Headrick for Congress

ADDRESS (number and street)

P.O. Box 218

Check if different than previously reported. (ACC)

Maynardville

TN

37807-0218

2. FEC IDENTIFICATION NUMBER ▼

C C00559062

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

TN

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dr. Mary M Headrick

Signature of Treasurer Dr. Mary M Headrick

**[Electronically Filed]**

Date

/  /

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Headrick for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	48767.41	114653.31
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	48767.41	114653.31
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	35399.01	54728.79
(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)).....	35399.01	54728.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	59924.52	
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

**Headrick for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27808.15	73893.15
(ii) Unitemized.....	10960.89	27166.21
(iii) TOTAL of contributions from individuals ▶	38769.04	101059.36
(b) Political Party Committees.....	1647.00	1647.00
(c) Other Political Committees (such as PACs).....	400.00	400.00
(d) The Candidate.....	7951.37	11546.95
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	48767.41	114653.31
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	48767.41	114653.31

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35399.01	54728.79
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).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	35399.01	54728.79

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	46556.12
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	48767.41
25. SUBTOTAL (add Line 23 and Line 24).....	95323.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35399.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	59924.52

**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 57
	<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)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Auda**

Mailing Address P.O. BOX 15367

City: Chattanooga State: TN Zip Code: 37415

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

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 12 / 2014

**Transaction ID : SA11AI.4778**

Amount of Each Receipt this Period: 200.00

Campaign Donation

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Auda**

Mailing Address P.O. BOX 15367

City: Chattanooga State: TN Zip Code: 37415

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

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 09 / 05 / 2014

**Transaction ID : SA11AI.4779**

Amount of Each Receipt this Period: 200.00

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Bibler**

Mailing Address 905 Oak St

City: Chattanooga State: TN Zip Code: 37403

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 21 / 2014

**Transaction ID : SA11AI.4791**

Amount of Each Receipt this Period: 150.00

Campaign Donation

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

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

550.00

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tom Bibler**

Mailing Address 905 Oak St

City Chattanooga State TN Zip Code 37403

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

Name of Employer None Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2014

**Transaction ID : SA11AI.4792**

Amount of Each Receipt this Period

Campaign Donation

**B.** Full Name (Last, First, Middle Initial)  
**Allen Boyd**

Mailing Address 1206 Ingleside Ave NE

City Athens State TN Zip Code 37303

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 20 / 2014

**Transaction ID : SA11AI.4796**

Amount of Each Receipt this Period

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**Lucille Boyd**

Mailing Address 1206 Ingleside Ave NE

City Athens State TN Zip Code 37303

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 20 / 2014

**Transaction ID : SA11AI.4797**

Amount of Each Receipt this Period

Campaign Donation

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

**TOTAL** 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 7 OF 57
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address 273 Arrowhead Trl

City Kingston State TN Zip Code 37763

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2014

**Transaction ID : SA11AI.4800**

Amount of Each Receipt this Period  
100.00

Campaign Donation

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

Mailing Address 4315 Hiawatha Dr

City Knoxville State TN Zip Code 37919

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2014

**Transaction ID : SA11AI.4816**

Amount of Each Receipt this Period  
250.00

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**Alice Chitty**

Mailing Address 1418 Winding Way

City Chattanooga State TN Zip Code 37405

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

Name of Employer St. Nicholas School Occupation Teacher

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  
 08 / 08 / 2014

**Transaction ID : SA11AI.4822**

Amount of Each Receipt this Period  
1000.00

Campaign Donation

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 8 OF 57  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pat Combs**

Mailing Address 502 Lullwater Rd

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : SA11AI.4833**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 85.93

In-kind - Uline Hanger Bags for 8/25 door-to-door canvassing  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Pat Combs**

Mailing Address 502 Lullwater Rd

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : SA11AI.4836**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

In-kind - City of Chattanooga Room Rental for 8/25 Kickoff  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Pat Combs**

Mailing Address 502 Lullwater Rd

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 270.38

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.4829**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 270.38

In-kind - Facebook Boosting

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

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

\_\_\_\_\_ 270.38

\_\_\_\_\_



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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pat Combs**

Mailing Address 502 Lullwater Rd

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**659.15**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.4832**

Amount of Each Receipt this Period  
**388.77**

In-kind - Mileage of 1495 miles at 26 center per mile

**B.** Full Name (Last, First, Middle Initial)  
**Pat Combs**

Mailing Address 502 Lullwater Rd

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**659.15**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.4838**

Amount of Each Receipt this Period  
**65.28**

In-kind - Pizza Hut Catering for Phone Banking Event  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Tom A. Dubose**

Mailing Address 1204 Hanover St

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
Requested Information Requested Information

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 25 / 2014

**Transaction ID : SA11AI.4857**

Amount of Each Receipt this Period  
**250.00**

Campaign Donation

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

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

**638.77**

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

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

FOR LINE NUMBER: PAGE 10 OF 57  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address 901 Oak St

City State Zip Code  
Chattanooga TN 37403

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

Name of Employer Occupation  
UTC Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
305.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2014

**Transaction ID : SA11AI.4865**

Amount of Each Receipt this Period  
 Campaign Donation 55.00

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

Mailing Address 1963 Tremin Rd

City State Zip Code  
La Habra Heights CA 90631

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2014

**Transaction ID : SA11AI.4883**

Amount of Each Receipt this Period  
 Campaign Donation 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Joan Hamner**

Mailing Address 200 Manufacturers Rd, Apt 515

City State Zip Code  
Chattanooga TN 37405

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  
 07 / 24 / 2014

**Transaction ID : SA11AI.4889**

Amount of Each Receipt this Period  
 Campaign Donation 300.00

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

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

1855.00

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joan Hamner**

Mailing Address 200 Manufacturers Rd, Apt 515

City: Chattanooga State: TN Zip Code: 37405

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: 700.00

Date of Receipt: 08 / 25 / 2014

**Transaction ID : SA11AI.4890**

Amount of Each Receipt this Period: 200.00

Campaign Donation

**B.** Full Name (Last, First, Middle Initial)  
**Joan Hamner**

Mailing Address 200 Manufacturers Rd, Apt 515

City: Chattanooga State: TN Zip Code: 37405

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: 1000.00

Date of Receipt: 09 / 21 / 2014

**Transaction ID : SA11AI.4891**

Amount of Each Receipt this Period: 300.00

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**Forestine Haynes**

Mailing Address 4909 N Moore Ln

City: Chattanooga State: TN Zip Code: 37411

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

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 10 / 2014

**Transaction ID : SA11AI.4894**

Amount of Each Receipt this Period: 100.00

Campaign Donation

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 12 OF 57  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Hendricks**

Mailing Address 31 Mountain Orchard Path

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer Occupation  
Erlanger Medical Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2014

**Transaction ID : SA11AI.4943**

Amount of Each Receipt this Period  
 100.00

Campaign Donation

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

Mailing Address 31 Mountain Orchard Path

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer Occupation  
Erlanger Medical Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : SA11AI.4944**

Amount of Each Receipt this Period  
 100.00

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**Steven Hollingsworth**

Mailing Address 14 N. Lynncrest Dr

City State Zip Code  
Chattanooga TN 37411

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

Name of Employer Occupation  
Requested Information Requested Information

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 25 / 2014

**Transaction ID : SA11AI.4952**

Amount of Each Receipt this Period  
 450.00

Campaign Donation

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

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

650.00

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ralph Hubbard**

Mailing Address 280 Hackworth

City Clinton State TN Zip Code 37716

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

Name of Employer Self-Employed Occupation Computer Analyst/Web Servicer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2080.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : SA11AI.5743**

Amount of Each Receipt this Period  
**520.00**  
 In-kind - Web server and web page for August

**B.** Full Name (Last, First, Middle Initial)  
**Ralph Hubbard**

Mailing Address 280 Hackworth

City Clinton State TN Zip Code 37716

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

Name of Employer Self-Employed Occupation Computer Analyst/Web Servicer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2080.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 18 / 2014**

**Transaction ID : SA11AI.6073**

Amount of Each Receipt this Period  
**810.00**  
 In-kind - charge/prepaid Discount Mugs, tee shirts - advertising buy-will repay him  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Ralph Hubbard**

Mailing Address 280 Hackworth

City Clinton State TN Zip Code 37716

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

Name of Employer Self-Employed Occupation Computer Analyst/Web Servicer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3120.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 30 / 2014**

**Transaction ID : SA11AI.5004**

Amount of Each Receipt this Period  
**1040.00**  
 In-kind - Web Services Provided for September, October (i.e. Webpage. Email. araphics)

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

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

**1560.00**

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Knight**

Mailing Address 1048 Lower Brow Rd

City State Zip Code  
Signal Mountaing TN 37377

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2014

**Transaction ID : SA11AI.4976**

Amount of Each Receipt this Period  
1000.00

Campaign Donation

**B.** Full Name (Last, First, Middle Initial)  
**Linda Knight**

Mailing Address 1048 Lower Brow Rd

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2014

**Transaction ID : SA11AI.4978**

Amount of Each Receipt this Period  
1000.00

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**Loren Lomenick**

Mailing Address 441 Pine Bluff Dr

City State Zip Code  
East Ridge TN 37412

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

Name of Employer Occupation  
University of TN at Chattanooga Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2014

**Transaction ID : SA11AI.4986**

Amount of Each Receipt this Period  
500.00

Campaign Donation

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 57
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alice Lupton**

Mailing Address 100 Scenic Hwy #18

City Lookout Mountain State TN Zip Code 37350

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

Name of Employer None 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  
 09 / 17 / 2014

**Transaction ID : SA11AI.4995**

Amount of Each Receipt this Period  
2100.00

Campaign Donation

**B.** Full Name (Last, First, Middle Initial)  
**Alice Lupton**

Mailing Address 100 Scenic Hwy #18

City Lookout Mountain State TN Zip Code 37350

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2014

**Transaction ID : SA11AI.4996**

Amount of Each Receipt this Period  
500.00

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**Donna Maddux**

Mailing Address 319 Park Rd

City Lookout Mountain State TN Zip Code 37350

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

Name of Employer Volunteer Behavior Health Occupation Center Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 08 / 2014

**Transaction ID : SA11AI.4999**

Amount of Each Receipt this Period  
250.00

Campaign Donation

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

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

2850.00

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Mills**

Mailing Address 29 S Crest Rd

City State Zip Code  
Chattanooga TN 37404

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

Name of Employer Occupation  
Self-Employed Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 06 / 2014

**Transaction ID : SA11AI.6367**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Olan Mills**

Mailing Address 3076 Rivermont Rd

City State Zip Code  
Chattanooga TN 37415

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 17 / 2014

**Transaction ID : SA11AI.6362**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address P.O. BOX

City State Zip Code  
Chattanooga TN 37401

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

Name of Employer Occupation  
Self-Employed Sculptor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 25 / 2014

**Transaction ID : SA11AI.4723**

Amount of Each Receipt this Period  
1000.00  
Campaign Donation

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

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

6200.00



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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jerry Ogle**

Mailing Address 134 Oliver Dr

City Madisonville State TN Zip Code 37354

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 14 / 2014

**Transaction ID : SA11AI.5062**

Amount of Each Receipt this Period  
**25.00**

Campaign Donation

**B.** Full Name (Last, First, Middle Initial)  
**Selma Paty**

Mailing Address 19 Patten Pkwy

City Chattanooga State TN Zip Code 37402-2211

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  
 09 / 30 / 2014

**Transaction ID : SA11AI.5067**

Amount of Each Receipt this Period  
**250.00**

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**Elizabeth Peelle**

Mailing Address 130 Oklahoma Ave

City Oak Ridge State TN Zip Code 37830

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : SA11AI.5068**

Amount of Each Receipt this Period  
**2000.00**

Campaign Donation

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

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

**2275.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 57
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Peelle**

Mailing Address 130 Oklahoma

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : SA11AI.5070**

Amount of Each Receipt this Period  
2000.00

Campaign Donation

**B.** Full Name (Last, First, Middle Initial)  
**Ann Jones Pierre**

Mailing Address 519 Terrell St

City State Zip Code  
Chattanooga TN 37411

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

Name of Employer Occupation  
Requested Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : SA11AI.5071**

Amount of Each Receipt this Period  
200.00

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**James Rome**

Mailing Address 116 Claymore Ln

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
None Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2014

**Transaction ID : SA11AI.5080**

Amount of Each Receipt this Period  
500.00

Campaign Donation

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

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

2700.00

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bruce Stewart**

Mailing Address 99 Walnut St, #402

City State Zip Code  
Chattanooga TN 37403

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 25 / 2014

**Transaction ID : SA11AI.5110**

Amount of Each Receipt this Period  
500.00

Campaign Donation

**B.** Full Name (Last, First, Middle Initial)  
**Evette Strickland**

Mailing Address 1775 Delano Rd

City State Zip Code  
Delano TN 37325

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 30 / 2014

**Transaction ID : SA11AI.5112**

Amount of Each Receipt this Period  
250.00

Campaign Donation

**C.** Full Name (Last, First, Middle Initial)  
**Linda Trien**

Mailing Address 104 Capital Cir

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
309.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : SA11AI.5122**

Amount of Each Receipt this Period  
109.00

Campaign Donation

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

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

859.00

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>Deborah Williams</b>		Date of Receipt MM / DD / YYYY 08 / 10 / 2014
Mailing Address 304 Creekshire Dr		<b>Transaction ID : SA11AI.5135</b>
City Signal Mountain	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	Campaign Donation
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Deborah Williams</b>		Date of Receipt MM / DD / YYYY 09 / 25 / 2014
Mailing Address 304 Creekshire Dr		<b>Transaction ID : SA11AI.5133</b>
City Signal Mountain	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer None	Occupation Retired	Campaign Donation
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2250.00	

Full Name (Last, First, Middle Initial) <b>John Wolfe Jr.</b>		Date of Receipt MM / DD / YYYY 08 / 31 / 2014
Mailing Address 707 Georgia Ave, Suite 302		<b>Transaction ID : SA11AI.5138</b>
City Chattanooga	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Attorney	Campaign Donation
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	27808.15

**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 57
<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)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**McMinn Democratic Party**

Mailing Address 9 S. Kilgore St

City Athens State TN Zip Code 37303

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  
 08 / 23 / 2014

**Transaction ID : SA11B.5025**

Amount of Each Receipt this Period  
 Campaign Donation  
 1000.00

Election Cycle-to-Date  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**McMinn Democratic Party**

Mailing Address 9 S. Kilgore St

City Athens State TN Zip Code 37303

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  
 09 / 20 / 2014

**Transaction ID : SA11B.5027**

Amount of Each Receipt this Period  
 McMinn Democratic Party Potluck Dinner (\$7 Ticket Price) Campaign Donation  
 147.00

Election Cycle-to-Date  
 1147.00

**C.** Full Name (Last, First, Middle Initial)  
**McMinn Democratic Women**

Mailing Address 9 S. Kilgore St

City Athens State TN Zip Code 37303

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  
 09 / 10 / 2014

**Transaction ID : SA11B.5028**

Amount of Each Receipt this Period  
 Campaign Donation  
 500.00

Election Cycle-to-Date  
 500.00

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

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

1647.00

**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 57
	<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)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Deaderick Montague</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. BOX		<b>Transaction ID : SA11B.5044</b>
City Chattanooga	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00
Name of Employer Self-Employed	Occupation Sculptor	Already Entered on 48 Hour Notice
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		Already Entered on 48 Hour Notice
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) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		Already Entered on 48 Hour Notice
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).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	1647.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 23 OF 57	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Loudon County Federation of Democratic Women**

Mailing Address 328 Okama Way

City Loudon State TN Zip Code 37774

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : SA11C.4989**

Amount of Each Receipt this Period  
400.00

Campaign Donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

400.00

400.00

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3256.05

Date of Receipt: 07 / 22 / 2014

**Transaction ID : SA11D.6177**

Amount of Each Receipt this Period: 287.07

In-kind - Office Depot, toner cartridges, office supplies

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3438.49

Date of Receipt: 07 / 22 / 2014

**Transaction ID : SA11D.6179**

Amount of Each Receipt this Period: 182.44

In-kind - Office Depot Paper, Toner, office supplies

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3531.60

Date of Receipt: 07 / 24 / 2014

**Transaction ID : SA11D.6181**

Amount of Each Receipt this Period: 93.11

In-kind - ATT phone install,prepay

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

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

562.62



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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3551.52

Date of Receipt: 07 / 30 / 2014

**Transaction ID : SA11D.6183**

Amount of Each Receipt this Period: 19.92

In-kind - Shoneys Athens, food volunteer meeting

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3594.14

Date of Receipt: 08 / 01 / 2014

**Transaction ID : SA11D.6185**

Amount of Each Receipt this Period: 42.62

In-kind - Tennessean subscriptio for issue research

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3661.34

Date of Receipt: 08 / 06 / 2014

**Transaction ID : SA11D.6187**

Amount of Each Receipt this Period: 67.20

In-kind - NGPVAN robocalls

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

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

129.74

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3698.34

Date of Receipt: 08 / 07 / 2014

**Transaction ID : SA11D.6188**

Amount of Each Receipt this Period: 37.00

In-kind - PR consultant lunch interview Taco Mamacita

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3710.66

Date of Receipt: 08 / 19 / 2014

**Transaction ID : SA11D.6189**

Amount of Each Receipt this Period: 12.32

In-kind - BiLo drinks for phone bank volunteers

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3711.91

Date of Receipt: 08 / 19 / 2014

**Transaction ID : SA11D.6193**

Amount of Each Receipt this Period: 1.25

In-kind - parking convention center

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

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

50.57

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **3836.64**

Date of Receipt: **08 / 23 / 2014**

**Transaction ID : SA11D.6195**

Amount of Each Receipt this Period: **124.73**

In-kind - office supplies

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **3886.64**

Date of Receipt: **08 / 26 / 2014**

**Transaction ID : SA11D.6199**

Amount of Each Receipt this Period: **50.00**

In-kind - NGP VAN robocalls

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **4210.82**

Date of Receipt: **08 / 27 / 2014**

**Transaction ID : SA11D.6201**

Amount of Each Receipt this Period: **18.55**

In-kind - mega bus fee balance to BattlegroundSolutions consultant visit

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

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

**193.28**

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **4192.27**

Date of Receipt: **08 / 27 / 2014**

**Transaction ID : SA11D.6202**

Amount of Each Receipt this Period: **305.63**

In-kind - Sonic printing,postcards

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **4868.06**

Date of Receipt: **08 / 28 / 2014**

**Transaction ID : SA11D.6203**

Amount of Each Receipt this Period: **50.24**

In-kind - Office Depot paper

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **4817.82**

Date of Receipt: **08 / 28 / 2014**

**Transaction ID : SA11D.6204**

Amount of Each Receipt this Period: **607.00**

In-kind - rent River Hills Manor, souther headquarters/apt

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

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

**962.87**

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **4888.48**

Date of Receipt: 08 / 29 / 2014

**Transaction ID : SA11D.6205**

Amount of Each Receipt this Period: **20.42**

In-kind - UTK bookstore, auction items events

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **4986.48**

Date of Receipt: 09 / 03 / 2014

**Transaction ID : SA11D.6206**

Amount of Each Receipt this Period: **98.00**

In-kind - stamps USPS

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5646.48**

Date of Receipt: 09 / 04 / 2014

**Transaction ID : SA11D.6207**

Amount of Each Receipt this Period: **660.00**

In-kind - tee shirt reorder Discount Mugs

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

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

**778.42**

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6262.44**

Date of Receipt: 09 / 05 / 2014

**Transaction ID : SA11D.6208**

Amount of Each Receipt this Period: **35.43**

In-kind - Banners on the Cheap

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6227.01**

Date of Receipt: 09 / 05 / 2014

**Transaction ID : SA11D.6209**

Amount of Each Receipt this Period: **147.60**

In-kind - Zoo Printing, postcards

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6079.41**

Date of Receipt: 09 / 05 / 2014

**Transaction ID : SA11D.6210**

Amount of Each Receipt this Period: **432.93**

In-kind - Zoo Printing bumper stickers

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

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

**615.96**

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6674.44**

Date of Receipt: 09 / 09 / 2014

**Transaction ID : SA11D.6211**

Amount of Each Receipt this Period: **412.00**

In-kind - Discount Mugs tee shirt reorder

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6679.35**

Date of Receipt: 09 / 10 / 2014

**Transaction ID : SA11D.6212**

Amount of Each Receipt this Period: **4.91**

In-kind - USPS certified mail

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6691.59**

Date of Receipt: 09 / 15 / 2014

**Transaction ID : SA11D.6213**

Amount of Each Receipt this Period: **12.24**

In-kind - 2 cent stamps for postcards

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

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

**429.15**

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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6741.59**

Date of Receipt: **09 / 16 / 2014**

**Transaction ID : SA11D.6214**

Amount of Each Receipt this Period: **50.00**

In-kind - NGP VAN robocalls

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6754.92**

Date of Receipt: **09 / 19 / 2014**

**Transaction ID : SA11D.6215**

Amount of Each Receipt this Period: **13.33**

In-kind - USPS certified mail

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6804.92**

Date of Receipt: **09 / 28 / 2014**

**Transaction ID : SA11D.6216**

Amount of Each Receipt this Period: **50.00**

In-kind - NGP Van robocalls

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

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

**113.33**



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

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None    Occupation: Not Employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **8270.35**

Date of Receipt: **09 / 30 / 2014**

**Transaction ID : SA11D.6217**

Amount of Each Receipt this Period: **1465.43**

In-kind - Zoo Printing mailer 1 printing

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

Mailing Address P.O. BOX 218

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

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

Name of Employer: None    Occupation: Not Employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **10920.35**

Date of Receipt: **09 / 30 / 2014**

**Transaction ID : SA11D.6357**

Amount of Each Receipt this Period: **2650.00**

In-kind - 10,400 miles at 26 cents/mi by odometer

**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).....

**4115.43**

**7951.37**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. 6Strong Media</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address 2158 Northgate Park Ln, Suite 210		Amount of Each Disbursement this Period 1350.00 <b>Transaction ID : SB17.5179</b>
City Chattanooga State TN Zip Code 37415	Purpose of Disbursement TV Ad Production with Johnny Stockman 004 Category/Type	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. ACTBLUE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 441146		Amount of Each Disbursement this Period 221.92 <b>Transaction ID : SB17.5152</b>
City SOMERVILLE State MA Zip Code 02144	Purpose of Disbursement Online Collection Fees From 7/19/2014 to 9/30/2014 (Withdrawn Before Transfer) 001 Category/Type	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address P.O. BOX 536216		Amount of Each Disbursement this Period 81.76 <b>Transaction ID : SB17.5169</b>
City Atlanta State GA Zip Code 30353-6216	Purpose of Disbursement Campaign Cell Phone (423-330-8018) 001 Category/Type	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1653.68
<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 35 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. ATT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address P.O. BOX 105503		Amount of Each Disbursement this Period 3651.60 <b>Transaction ID : SB17.5143</b>
City Atlanta State GA Zip Code 30348-5503	Purpose of Disbursement Phones (LAN 992-0631) 2 mo.+install 001 Category/Type	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Battleground Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 703 E Long St Unit #4		Amount of Each Disbursement this Period 2854.53 <b>Transaction ID : SB17.5766</b>
City Columbus State OH Zip Code 43203	Purpose of Disbursement fee political strategy consultant and fundraising training-political firm	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>c. Battleground Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 703 E Long St Unit #4		Amount of Each Disbursement this Period 641.20 <b>Transaction ID : SB17.5768</b>
City Columbus State OH Zip Code 43203	Purpose of Disbursement fee political consultant for strategy and fundraising help 001 Category/Type	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3651.60
<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 36 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Battleground Solutions</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 703 E Long St Unit #4		Amount of Each Disbursement this Period 61.25 <b>Transaction ID : SB17.5769</b>
City Columbus	State OH Zip Code 43203	
Purpose of Disbursement to political consultant for part of megabus travel to train in fundraising		Category/ Type 002
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. C&amp;D Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 5351 Tennyson St, Unit 1C		Amount of Each Disbursement this Period 659.00 <b>Transaction ID : SB17.5147</b>
City Denver	State CO Zip Code 80212	
Purpose of Disbursement 1000 Bumper Stickers Invoice # 038227		Category/ Type 006
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>c. C&amp;D Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 5351 Tennyson St, Unit 1C		Amount of Each Disbursement this Period 23.80 <b>Transaction ID : SB17.5149</b>
City Denver	State CO Zip Code 80212	
Purpose of Disbursement 1000 Bumper Sticker Shipping invoice#038227CORR		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	744.05
<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 37 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pat Combs</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 85.93
City Chattanooga	State TN	
Zip Code 37405	Purpose of Disbursement In-kind - Uline Hanger Bags for 8/25 door-to-door canvassing	Transaction ID : SB17.4834
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pat Combs</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 100.00
City Chattanooga	State TN	
Zip Code 37405	Purpose of Disbursement In-kind - City of Chattanooga Room Rental for 8/25 Kickoff	Transaction ID : SB17.4837
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Pat Combs</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 100.00
City Chattanooga	State TN	
Zip Code 37405	Purpose of Disbursement Repayment: City of Chattanooga Room Rental for 8/25 Kickoff	Transaction ID : SB17.5186
Candidate Name <b>Headrick for Congress</b>	Category/Type 009	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	100.00
<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 38 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pat Combs</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 65.28
City Chattanooga	State TN	
Purpose of Disbursement Repayment: Pizza Hut Catering for Phone Banking Event		Transaction ID : SB17.5187
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 009
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Pat Combs</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 270.38
City Chattanooga	State TN	
Purpose of Disbursement In-kind - Facebook Boosting		Transaction ID : SB17.4831
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 004
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Pat Combs</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 388.77
City Chattanooga	State TN	
Purpose of Disbursement In-kind - Mileage of 1495 miles at 26 center per mile		Transaction ID : SB17.4835
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 002
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	724.43
<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 39 OF 57			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pat Combs</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 65.28
City Chattanooga	State TN	
Zip Code 37405	Purpose of Disbursement In-kind - Pizza Hut Catering for Phone Banking Event	<b>Transaction ID : SB17.4839</b>
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 6203 Bramblewood Dr		Amount of Each Disbursement this Period 4519.45
City Hixson	State TN	
Zip Code 37343	Purpose of Disbursement Comcast TV Time	<b>Transaction ID : SB17.5164</b>
Candidate Name <b>Headrick for Congress</b>	Category/Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>C. EPBFI</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address P.O. BOX 182251		Amount of Each Disbursement this Period 254.52
City Chattanooga	State TN	
Zip Code 37422	Purpose of Disbursement Quarter Fees for EPBFI Phone	<b>Transaction ID : SB17.5159</b>
Candidate Name <b>Headrick for Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4773.97
<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 40 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 287.07 <b>Transaction ID : SB17.6178</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Office Depot, toner cartridges, office supplies		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 182.44 <b>Transaction ID : SB17.6180</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Office Depot Paper, Toner, office supplies		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 93.11 <b>Transaction ID : SB17.6182</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - ATT phone install,prepay		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	562.62
<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 41 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 19.92 <b>Transaction ID : SB17.6184</b>
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - Shoneys Athens, food volunteer meeting	Category/ Type 007
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5223</b>
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement Repayment: Battleground Solutions for political strategy and advisory consultations fee advance	Category/ Type 001
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

Full Name (Last, First, Middle Initial) <b>c. Battleground Solutions</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 703 E Long St Unit #4		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5223.0</b> <b>[MEMO ITEM]</b>
City Columbus	State OH	
Zip Code 43203	Purpose of Disbursement Payment: Political Strategy and Advisory Consultation Fee	Category/ Type 001
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19.92
<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 42 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 42.62 <b>Transaction ID : SB17.6186</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Tennessean subscriptio for issue research		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 67.20 <b>Transaction ID : SB17.6192</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - NGPVAN robocalls		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 37.00 <b>Transaction ID : SB17.6191</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - PR consultant lunch interview Taco Mamacita		Category/ Type 001
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	146.82
<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 43 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 12.32 <b>Transaction ID : SB17.6190</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - BiLo drinks for phone bank volunteers		Category/ Type 007
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 1.25 <b>Transaction ID : SB17.6194</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - parking convention center		Category/ Type 002
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 124.73 <b>Transaction ID : SB17.6198</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - office supplies		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	138.30
<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 44 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5224</b>
City Maynardville	State TN	
Purpose of Disbursement electronic xfer: Battleground Solutions for political strategy and advisory consultation fee advance		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Battleground Solutions</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address 703 E Long St Unit #4		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5224.0</b> <b>[MEMO ITEM]</b>
City Columbus	State OH	
Purpose of Disbursement Final Fee: Political Strategy and Advisory Consultation Fee		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5225</b>
City Maynardville	State TN	
Purpose of Disbursement payment Battleground employ bus fee, strategy fundraising consulting visit		Category/ Type 008
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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 45 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A. Battleground Solutions**

Full Name (Last, First, Middle Initial)  
Mailing Address 703 E Long St  
Unit #4

City Columbus State OH Zip Code 43203

Purpose of Disbursement  
Repayment: part of MegaBus transportation expense Consultant visit for training in fundraising

Candidate Name  
**Headrick for Congress**

Office Sought:  House  Senate  President  
State: TN District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify)

Date of Disbursement  
MM / DD / YYYY  
08 / 25 / 2014

Amount of Each Disbursement this Period  
0.00

Transaction ID : SB17.5225.0

[MEMO ITEM]

Category/Type  
007

**B. Dr. Mary M Headrick**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 218

City Maynardville State TN Zip Code 37807-0218

Purpose of Disbursement  
In-kind - NGP VAN robocalls

Candidate Name  
**Headrick for Congress**

Office Sought:  House  Senate  President  
State: TN District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify)

Date of Disbursement  
MM / DD / YYYY  
08 / 26 / 2014

Amount of Each Disbursement this Period  
50.00

Transaction ID : SB17.6200

Category/Type  
004

**c. Dr. Mary M Headrick**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 218

City Maynardville State TN Zip Code 37807-0218

Purpose of Disbursement  
In-kind - Sonic printing, postcards

Candidate Name  
**Headrick for Congress**

Office Sought:  House  Senate  President  
State: TN District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify)

Date of Disbursement  
MM / DD / YYYY  
08 / 27 / 2014

Amount of Each Disbursement this Period  
305.63

Transaction ID : SB17.6234

Category/Type  
004

**SUBTOTAL** of Disbursements This Page (optional)..... 355.63

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 18.55 <b>Transaction ID : SB17.6235</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - mega bus fee balance to BattlegroundSolutions consultant visit		Category/ Type 002
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 607.00 <b>Transaction ID : SB17.6232</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - rent River Hills Manor, souther headquarters/apt		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 50.24 <b>Transaction ID : SB17.6233</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Office Depot paper		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	675.79
<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 47 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 21

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 778.42 <b>Transaction ID : SB17.6231</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - UTK bookstore, auction items events		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 98.00 <b>Transaction ID : SB17.6230</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - stamps USPS		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 660.00 <b>Transaction ID : SB17.6229</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - tee shirt reorder Discount Mugs		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	778.42
<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 48 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 432.93 <b>Transaction ID : SB17.6226</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Zoo Printing bumper stickers		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 147.60 <b>Transaction ID : SB17.6227</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Zoo Printing, postcards		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 35.43 <b>Transaction ID : SB17.6228</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Banners on the Cheap		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	615.96
<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 49 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 412.00 <b>Transaction ID : SB17.6225</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Discount Mugs tee shirt reorder		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 4.91 <b>Transaction ID : SB17.6224</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - USPS certified mail		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 12.24 <b>Transaction ID : SB17.6223</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - 2 cent stamps for postcards		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	429.15
<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 50 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.6222</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - NGP VAN robocalls		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 13.33 <b>Transaction ID : SB17.6221</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - USPS certified mail		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.6220</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - NGP Van robocalls		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	113.33
<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 51 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 1465.43 <b>Transaction ID : SB17.6219</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Zoo Printing mailer 1 printing		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 2650.00 <b>Transaction ID : SB17.6358</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - 10,400 miles at 26 cents/mi by odometer		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Ralph Hubbard</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 280 Hackworth		Amount of Each Disbursement this Period 520.00 <b>Transaction ID : SB17.5744</b>
City Clinton	State TN	
Purpose of Disbursement In-kind - Web server and web page for August		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4635.43
<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 52 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ralph Hubbard</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 280 Hackworth		Amount of Each Disbursement this Period 810.00 <b>Transaction ID : SB17.5948</b>
City Clinton	State TN	
Purpose of Disbursement tee shirts order of Discount Mugs, loan repay		Category/ Type 009
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Discount Mugs</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 12619 NW 115th Ave, Bldg #200		Amount of Each Disbursement this Period 810.00 <b>Transaction ID : SB17.5948.0</b>
City Medley	State FL	
Purpose of Disbursement item was advance paid by hubbard's charge, he was repaid		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Ralph Hubbard</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 280 Hackworth		Amount of Each Disbursement this Period 810.00 <b>Transaction ID : SB17.6074</b>
City Clinton	State TN	
Purpose of Disbursement In-kind - charge/prepaid Discount Mugs, tee shirts - advertising buy-will repay him		Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	810.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : SB17.5948

charged to buy tee shirts from discount mugs on 8/18 for repay

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ralph Hubbard</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 280 Hackworth		Amount of Each Disbursement this Period 1040.00 <b>Transaction ID : SB17.5006</b>
City Clinton	State TN	
Purpose of Disbursement In-kind - Web Services Provided for September, October (i.e. Webpage, Email, graphics)		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Markco Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1609 Hamill Rd		Amount of Each Disbursement this Period 349.60 <b>Transaction ID : SB17.5166</b>
City Hixson	State TN	
Purpose of Disbursement Large Signs (10 4'x4' signs)		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. PCSigns</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2534 Commerce Blvd		Amount of Each Disbursement this Period 1398.21 <b>Transaction ID : SB17.5156</b>
City Cincinnati	State OH	
Purpose of Disbursement Yard Signs		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2787.81
<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 55 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

**A. PCSigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 2534 Commerce Blvd

City Cincinnati State OH Zip Code 45241

Purpose of Disbursement  
Yard Signs

Candidate Name  
**Headrick for Congress**

Office Sought:  House  Senate  President  
State: TN District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify)

Date of Disbursement  
MM / DD / YYYY  
08 / 04 / 2014

Amount of Each Disbursement this Period  
433.63

Transaction ID : SB17.5158

Category/Type: 004

**B. PCSigns**

Full Name (Last, First, Middle Initial)  
Mailing Address 2534 Commerce Blvd

City Cincinnati State OH Zip Code 45241

Purpose of Disbursement  
1000 Yard Signs

Candidate Name  
**Headrick for Congress**

Office Sought:  House  Senate  President  
State: TN District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify)

Date of Disbursement  
MM / DD / YYYY  
09 / 19 / 2014

Amount of Each Disbursement this Period  
1751.31

Transaction ID : SB17.5172

Category/Type: 004

**c. Sonic**

Full Name (Last, First, Middle Initial)  
Mailing Address 5018 Tampa West Blvd

City Tampa State FL Zip Code 33634

Purpose of Disbursement  
10K Cards Printed

Candidate Name  
**Headrick for Congress**

Office Sought:  House  Senate  President  
State: TN District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify)

Date of Disbursement  
MM / DD / YYYY  
07 / 28 / 2014

Amount of Each Disbursement this Period  
455.00

Transaction ID : SB17.5150

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional)..... 2639.94

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sonic</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 5018 Tampa West Blvd		Amount of Each Disbursement this Period 203.09 <b>Transaction ID : SB17.5163</b>
City Tampa State FL Zip Code 33634	Purpose of Disbursement 5000 Post Cards, Order #38243 Category/Type 004	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Sonic</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 5018 Tampa West Blvd		Amount of Each Disbursement this Period 305.63 <b>Transaction ID : SB17.5183</b>
City Tampa State FL Zip Code 33634	Purpose of Disbursement 10K Print Cards, Order # 38162 Category/Type 004	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>c. Viacom/EPB</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 10 W MLK Blvd		Amount of Each Disbursement this Period 983.00 <b>Transaction ID : SB17.5181</b>
City Chattanooga State TN Zip Code 37402	Purpose of Disbursement TV Ads Category/Type 004	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1491.72
<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 57 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Headrick for Congress**

Full Name (Last, First, Middle Initial) <b>A. WRCB-TV</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 900 Whitehall Rd		Amount of Each Disbursement this Period 3689.00 <b>Transaction ID : SB17.5141</b>
City Chattanooga	State TN	
Purpose of Disbursement TV Ad Time Channel 3	Category/ Type 004	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. WRCB-TV</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2014
Mailing Address 900 Whitehall Rd		Amount of Each Disbursement this Period 2498.00 <b>Transaction ID : SB17.5168</b>
City Chattanooga	State TN	
Purpose of Disbursement Channel 3 TV Time	Category/ Type 004	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. WTVC Channel 9</b>		Date of Disbursement MM / DD / YYYY 09 / 24 / 2014
Mailing Address 4279 Benton Dr		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.5175</b>
City Chattanooga	State TN	
Purpose of Disbursement 4 TV Ads (Nov 3 & 4)	Category/ Type 004	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7187.00
<b>TOTAL</b> This Period (last page this line number only).....	35035.66