

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

CITIZENS TO ELECT PHIL ROE TO CONGRESS

ADDRESS (number and street)

PO Box 3218

Check if different than previously reported. (ACC)

Johnson City

TN

37602-3218

2. **FEC IDENTIFICATION NUMBER**

C C00444471

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

TN

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 GERALD THOMAS

Signature of Treasurer GERALD THOMAS

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

CITIZENS TO ELECT PHIL ROE TO 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))....	13065	368914
(b) Total Contribution Refunds (from Line 20(d))	0	450
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	13065	368464
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	26962.84	275577.71
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	98.61
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	26962.84	275479.1
8. Cash on Hand at Close of Reporting Period (from Line 27).....	459895.75	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	69900	

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

CITIZENS TO ELECT PHIL ROE TO CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8650	332081
(ii) Unitemized.....	4415	36833
(iii) TOTAL of contributions from individuals ▶	13065	368914
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13065	368914
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	98.61
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	13065	369012.61

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	26962.84	275577.71
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	39703.93
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	39703.93
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	450
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	450
21. OTHER DISBURSEMENTS	1000	5000
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	27962.84	320731.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	474793.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13065
25. SUBTOTAL (add Line 23 and Line 24).....	487858.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	27962.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	459895.75

**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 34
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

A. Full Name (Last, First, Middle Initial)
Shahin Assadnia

Mailing Address 533 E 2nd North Street

City State Zip Code
Morristown TN 37814-4483

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

Name of Employer Occupation
East TN Vascular Center Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : A-CF6773

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Teresa Beam MD

Mailing Address 108 Dundee Court

City State Zip Code
Noblesville IN 46060-5436

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

Name of Employer Occupation
Urology of Indiana Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : A-CF6794

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Robert Bird

Mailing Address 233 Briar Patch Lane

City State Zip Code
Greeneville TN 37745-3713

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 17 / 2014

Transaction ID : A-CF6729

Amount of Each Receipt this Period
100

SUBTOTAL of Receipts This Page (optional).....	1100.00
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 6 OF 34
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

A. Full Name (Last, First, Middle Initial)
Alexander Borla

Mailing Address 3602 Honeywood Drive

City Johnson City State TN Zip Code 37604-1476

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

Name of Employer Borla Performance Inc. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 22 / 2014

Transaction ID : A-CF6737

Amount of Each Receipt this Period
1000

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

Mailing Address 3 S Foxxborough Lane

City Johnson City State TN Zip Code 37604-7611

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**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 14 / 2014

Transaction ID : A-CF6688

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
John Fincher

Mailing Address 136 Fairfield Drive

City Bristol State TN Zip Code 37620-4448

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

Name of Employer Nicewonder Cancer Ctr @ BRMC Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 29 / 2014

Transaction ID : A-CF6733

Amount of Each Receipt this Period
500

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 34
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

A. Full Name (Last, First, Middle Initial)
A. D. Fletcher

Mailing Address 115 Muddy Branch Road

City Elizabethton State TN Zip Code 37643-5625

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

Name of Employer Fletcher's Market & Deli Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 03 / 2014

Transaction ID : A-CF6684

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Pickens A. Gantt

Mailing Address 1953 Highway 11 W

City Bristol State TN Zip Code 37620-8543

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

Name of Employer Appalachian Fertility Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 14 / 2014

Transaction ID : A-CF6713

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Jonathan Henderson MD

Mailing Address 2739 Alvarado Drive

City Shreveport State LA Zip Code 71106-8262

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

Name of Employer Regional Unology, LLC Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : A-CF6795

Amount of Each Receipt this Period
1000

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 34
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

A. Full Name (Last, First, Middle Initial)
Carl Jones

Mailing Address 502 Dry Creek Road

City Erwin State TN Zip Code 37650-4204

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

Name of Employer Jones Farms Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 14 / 2014

Transaction ID : A-CF6687

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Peter Knapp MD

Mailing Address 1009 Laurelwood

City Carmel State IN Zip Code 46032-8743

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

Name of Employer Urology of Indiana Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : A-CF6793

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
John McManus

Mailing Address 610 10th Street NW Suite 300

City Washington State DC Zip Code 20001-4588

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

Name of Employer The McManus Group Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : A-CF6788

Amount of Each Receipt this Period
500

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 34
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

A. Full Name (Last, First, Middle Initial)
Kenneth Ney MD

Mailing Address 12067 Eden Glen Drive

City Carmel State IN Zip Code 46033-4354

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

Name of Employer Urology of Indiana Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 20 / 2014

Transaction ID : A-CF6790

Amount of Each Receipt this Period
500

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

Mailing Address 12967 Water Ridge Drive

City McCordsville State IN Zip Code 46055-9650

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

Name of Employer Urology of Indiana Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : A-CF6792

Amount of Each Receipt this Period
750

C. Full Name (Last, First, Middle Initial)
Janice Stelzman

Mailing Address 303 E 3rd North Street

City Morristown State TN Zip Code 37814-4450

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2014

Transaction ID : A-CF6782

Amount of Each Receipt this Period
100

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

A. Full Name (Last, First, Middle Initial)
Ronald Suh

Mailing Address 6717 E Stonegate Drive

City State Zip Code
Zionsville IN 46077-8594

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

Name of Employer Occupation
Urology of Indiana Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : A-CF6791

Amount of Each Receipt this Period
500

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

Mailing Address 1103 Ambleside Road

City State Zip Code
Kingsport TN 37660-5003

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

Name of Employer Occupation
Teamsters Union Labor Union Official

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : A-CF6776

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
David Walters MD

Mailing Address 2137 Hickory Springs Road

City State Zip Code
Johnson City TN 37604-8706

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

Name of Employer Occupation
Retired Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 14 / 2014

Transaction ID : A-CF6720

Amount of Each Receipt this Period
150

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

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

750.00

8650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 34	
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Aristotle/Campaign Manager		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 2100 Transaction ID : B-E-6757
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software and Technical support Candidate Name Category/Type 001	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Atmos Energy		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 2833 W Market Street		Amount of Each Disbursement this Period 94.66 Transaction ID : B-E-6696
City Johnson City State TN Zip Code 37604-5185	Purpose of Disbursement Utilities - Gas Candidate Name Category/Type 001	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Atmos Energy		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 2833 W Market Street		Amount of Each Disbursement this Period 104.39 Transaction ID : B-E-6749
City Johnson City State TN Zip Code 37604-5185	Purpose of Disbursement Utilities - Gas Candidate Name Category/Type 001	
Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	2299.05
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 12 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Atmos Energy			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014		
Mailing Address 2833 W Market Street			Amount of Each Disbursement this Period 79.98		
City Johnson City	State TN	Zip Code 37604-5185	Transaction ID : B-E-6810		
Purpose of Disbursement Utilites - Gas		001 Category/ Type			
Candidate Name					
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) B. Comcast			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014		
Mailing Address 1794 Old Gray Station Road			Amount of Each Disbursement this Period 181.2		
City Johnson City	State TN	Zip Code 37615-3869	Transaction ID : B-E-6692		
Purpose of Disbursement Utilities-Phone/Internet		001 Category/ Type			
Candidate Name					
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) c. Comcast			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014		
Mailing Address 1794 Old Gray Station Road			Amount of Each Disbursement this Period 167.71		
City Johnson City	State TN	Zip Code 37615-3869	Transaction ID : B-E-6698		
Purpose of Disbursement Utilities-Phone/Internet		001 Category/ Type			
Candidate Name					
Office Sought: <input 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: District:					

SUBTOTAL of Disbursements This Page (optional).....	428.89
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 13 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 1794 Old Gray Station Road		Amount of Each Disbursement this Period 167.71 Transaction ID : B-E-6804
City Johnson City State TN Zip Code 37615-3869	Purpose of Disbursement Utilities - Phone, Cable 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 3635 Ruffin Road		Amount of Each Disbursement this Period 84.38 Transaction ID : B-E-6802
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 3635 Ruffin Road		Amount of Each Disbursement this Period 21.01 Transaction ID : B-E-6803
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	273.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 3635 Ruffin Road		Amount of Each Disbursement this Period 37.5 Transaction ID : B-E-6815
City San Diego	State CA	
Zip Code 92123-1880	Purpose of Disbursement Credit Card Fees	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. First Bankcard		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 1620 Dodge Street		Amount of Each Disbursement this Period 431.16 Transaction ID : B-E-6704
City Omaha	State NE	
Zip Code 68197-0003	Purpose of Disbursement Campaign Credit Card Payment	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Original vendors exceeding reporting threshold itemized as memo transactions.
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Pilot #051		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 11190 Baileyton Road		Amount of Each Disbursement this Period 36.83 Transaction ID : B-S-504
City Greenville	State TN	
Zip Code 37745-7480	Purpose of Disbursement Gasoline	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	[MEMO ITEM] Subitemization of First Bankcard(01/03/14)
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	468.66
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 15 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Roadrunner #142		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 900 Sunset Drive		Amount of Each Disbursement this Period 41.22
City Johnson City	State TN	Zip Code 37604-3623
Purpose of Disbursement Gasoline	Category/Type 001	
Candidate Name		Transaction ID : B-S-514
Office Sought: <input 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: District:	[MEMO ITEM] Subitemization of First Bankcard(01/03/14)	

Full Name (Last, First, Middle Initial) B. Pilot #051		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 11190 Baileyton Road		Amount of Each Disbursement this Period 36.65
City Greeneville	State TN	Zip Code 37745-7480
Purpose of Disbursement Gasoline	Category/Type 001	
Candidate Name		Transaction ID : B-S-515
Office Sought: <input 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: District:	[MEMO ITEM] Subitemization of First Bankcard(01/03/14)	

Full Name (Last, First, Middle Initial) C. Roadrunner #142		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 900 Sunset Drive		Amount of Each Disbursement this Period 39.84
City Johnson City	State TN	Zip Code 37604-3623
Purpose of Disbursement Gasoline	Category/Type 001	
Candidate Name		Transaction ID : B-S-507
Office Sought: <input 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: District:	[MEMO ITEM] Subitemization of First Bankcard(01/03/14)	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. GasNGo 641			Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 4307 N. Roan St.			Amount of Each Disbursement this Period 998.96
City Johnson City	State TN	Zip Code 37615	
Purpose of Disbursement Gasoline	Candidate Name		Transaction ID : B-S-512 [MEMO ITEM] Subitemization of First Bankcard(01/03/14)
Office Sought: <input 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: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) B. First Bankcard			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 1620 Dodge Street			Amount of Each Disbursement this Period 998.96
City Omaha	State NE	Zip Code 68197-0003	
Purpose of Disbursement Payment - Campaign Credit Card	Candidate Name		Transaction ID : B-E-6742 Original vendors exceeding reporting threshold itemized as memo transactions.
Office Sought: <input 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: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) C. GasNGo 641			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013
Mailing Address 4307 N. Roan St.			Amount of Each Disbursement this Period 41.96
City Johnson City	State TN	Zip Code 37615	
Purpose of Disbursement Gasoline	Candidate Name		Transaction ID : B-S-532 [MEMO ITEM] Subitemization of First Bankcard(02/03/14)
Office Sought: <input 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: District:	Category/Type 001		

SUBTOTAL of Disbursements This Page (optional).....	998.96
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 17 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Giuseppe's		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 2539 E Stone Drive		Amount of Each Disbursement this Period 249.53
City Kingsport State TN Zip Code 37660-5858	Purpose of Disbursement Lunch expense Candidate Name Category/Type 001	
Office Sought: <input 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: District:	[MEMO ITEM] Subitemization of First Bankcard(02/03/14)

Full Name (Last, First, Middle Initial) B. GasNGo 641		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013
Mailing Address 4307 N. Roan St.		Amount of Each Disbursement this Period 40.83
City Johnson City State TN Zip Code 37615	Purpose of Disbursement Gasoline Candidate Name Category/Type 001	
Office Sought: <input 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: District:	[MEMO ITEM] Subitemization of First Bankcard(02/03/14)

Full Name (Last, First, Middle Initial) c. Gourmet & Company		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 214 E Mountcastle Drive		Amount of Each Disbursement this Period 236.01
City Johnson City State TN Zip Code 37601-2541	Purpose of Disbursement Lunch Candidate Name Category/Type 003	
Office Sought: <input 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: District:	[MEMO ITEM] Subitemization of First Bankcard(02/03/14)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Food City #641		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 4307 N Roan Street		Amount of Each Disbursement this Period 3.06
City Johnson City State TN Zip Code 37615-4973	Purpose of Disbursement Office Supplies 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-527 [MEMO ITEM] Subitemization of First Bankcard(02/03/14)
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. GasNGo 641		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 4307 N. Roan St.		Amount of Each Disbursement this Period 37.64
City Johnson City State TN Zip Code 37615	Purpose of Disbursement Gasoline 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-530 [MEMO ITEM] Subitemization of First Bankcard(02/03/14)
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Champion Chevrolet Cadillac		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address PO Box 4748		Amount of Each Disbursement this Period 67.07
City Johnson City State TN Zip Code 37602-4748	Purpose of Disbursement Automobile Maintenance & Repai 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-535 [MEMO ITEM] Subitemization of First Bankcard(02/03/14)
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 34	
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

A. First Bankcard

Full Name (Last, First, Middle Initial)

Mailing Address 1620 Dodge Street

City Omaha State NE Zip Code 68197-0003

Purpose of Disbursement Payment Campaign Credit Card

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 03 / 01 / 2014

Amount of Each Disbursement this Period 302.72

Transaction ID : B-E-6787

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Roadrunner #142

Full Name (Last, First, Middle Initial)

Mailing Address 900 Sunset Drive

City Johnson City State TN Zip Code 37604-3623

Purpose of Disbursement Gasoline

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 01 / 06 / 2014

Amount of Each Disbursement this Period 37.57

Transaction ID : B-S-540

[MEMO ITEM]
Subitemization of First Bankcard(03/01/14)

C. GasNGo 641

Full Name (Last, First, Middle Initial)

Mailing Address 4307 N. Roan St.

City Johnson City State TN Zip Code 37615

Purpose of Disbursement Gasoline

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 01 / 17 / 2014

Amount of Each Disbursement this Period 41.42

Transaction ID : B-S-543

[MEMO ITEM]
Subitemization of First Bankcard(03/01/14)

SUBTOTAL of Disbursements This Page (optional)..... 302.72

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 34	
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. GasNGo 641		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 4307 N. Roan St.		Amount of Each Disbursement this Period 38.19
City Johnson City	State TN Zip Code 37615	
Purpose of Disbursement Gasoline	Category/Type 001	Transaction ID : B-S-544 [MEMO ITEM] Subitemization of First Bankcard(03/01/14)
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. GasNGo 641		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 4307 N. Roan St.		Amount of Each Disbursement this Period 40.33
City Johnson City	State TN Zip Code 37615	
Purpose of Disbursement Gasoline	Category/Type 001	Transaction ID : B-S-542 [MEMO ITEM] Subitemization of First Bankcard(03/01/14)
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Greene County Republican Women		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address PO Box 1		Amount of Each Disbursement this Period 900
City Greenville	State TN Zip Code 37744-0001	
Purpose of Disbursement Advertising: Lincoln Day Dinner	Category/Type 004	Transaction ID : B-E-6700
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 34		
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Jefferson County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 149 E Main Street		Amount of Each Disbursement this Period 300 Transaction ID : B-E-6814
City Dandridge	State TN Zip Code 37725-4822	
Purpose of Disbursement Lincoln-Reagan Day Dinner	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Johnson City Power Board		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address PO Box 2058		Amount of Each Disbursement this Period 49.81 Transaction ID : B-E-6693
City Johnson City	State TN Zip Code 37605-2058	
Purpose of Disbursement Utilities-Phone/Internet	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Johnson City Power Board		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address PO Box 2058		Amount of Each Disbursement this Period 53.67 Transaction ID : B-E-6745
City Johnson City	State TN Zip Code 37605-2058	
Purpose of Disbursement Utilities - Power	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	403.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 34	
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Johnson City Power Board		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 2058		Amount of Each Disbursement this Period 52.7 Transaction ID : B-E-6807
City Johnson City	State TN Zip Code 37605-2058	
Purpose of Disbursement Utilities - Power	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Johnson City Utility System		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO Box 2386		Amount of Each Disbursement this Period 28.3 Transaction ID : B-E-6695
City Johnson City	State TN Zip Code 37605-2386	
Purpose of Disbursement Utility/Water	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Johnson City Utility System		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address PO Box 2386		Amount of Each Disbursement this Period 27.41 Transaction ID : B-E-6747
City Johnson City	State TN Zip Code 37605-2386	
Purpose of Disbursement Utilities - Water	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	108.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 34	
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Johnson City Utility System		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address PO Box 2386		Amount of Each Disbursement this Period 29.17 Transaction ID : B-E-6809
City Johnson City State TN Zip Code 37605-2386	Purpose of Disbursement Utilities - Water Candidate Name Category/Type 001	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Mailworks, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 320 Wesley Street		Amount of Each Disbursement this Period 166.62 Transaction ID : B-E-6691
City Johnson City State TN Zip Code 37601-1722	Purpose of Disbursement Fundraising: Fundraising Candidate Name Category/Type 003	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) C. Payment Processing Center - Ally		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2014
Mailing Address PO Box 9001951		Amount of Each Disbursement this Period 348.9 Transaction ID : B-E-6697
City Louisville State KY Zip Code 40290-1951	Purpose of Disbursement Car Payment Candidate Name Category/Type 001	
Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	544.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Payment Processing Center - Ally		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address PO Box 9001951		Amount of Each Disbursement this Period 348.9 Transaction ID : B-E-6750
City Louisville	State KY	
Zip Code 40290-1951	Purpose of Disbursement Car Payment	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Payment Processing Center - Ally		Date of Disbursement MM / DD / YYYY 03 / 18 / 2014
Mailing Address PO Box 9001951		Amount of Each Disbursement this Period 348.9 Transaction ID : B-E-6811
City Louisville	State KY	
Zip Code 40290-1951	Purpose of Disbursement Automobile Payment	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Tennessee Right To Life		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address PO Box 110765		Amount of Each Disbursement this Period 500 Transaction ID : B-E-6756
City Nashville	State TN	
Zip Code 37222-0765	Purpose of Disbursement Advertising: Ad	Category/ Type 004
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	1197.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 34	
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. The Lukens Co.		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 2800 S Shirlington Road Floor 9		Amount of Each Disbursement this Period 5822.28 Transaction ID : B-E-6690
City Arlington	State VA	
Zip Code 22206-3601	Purpose of Disbursement Fundraising: Fundraising Expense	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 1100 N State Of Franklin Road		Amount of Each Disbursement this Period 55.31 Transaction ID : B-E-6738
City Johnson City	State TN	
Zip Code 37604-7908	Purpose of Disbursement Administrative/Salary/Overhead: Postage	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 1100 N State Of Franklin Road		Amount of Each Disbursement this Period 14.85 Transaction ID : B-E-6743
City Johnson City	State TN	
Zip Code 37604-7908	Purpose of Disbursement Administrative/Salary/Overhead: Postage	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	5892.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. United States Post Office			Date of Disbursement MM / DD / YYYY 02 / 11 / 2014
Mailing Address 1100 N State Of Franklin Road			Amount of Each Disbursement this Period 49 Transaction ID : B-E-6746
City Johnson City	State TN	Zip Code 37604-7908	
Purpose of Disbursement Administrative/Salary/Overhead: Postage		Category/Type 001	
Candidate Name			
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) B. United States Post Office			Date of Disbursement MM / DD / YYYY 03 / 12 / 2014
Mailing Address 1100 N State Of Franklin Road			Amount of Each Disbursement this Period 64 Transaction ID : B-E-6808
City Johnson City	State TN	Zip Code 37604-7908	
Purpose of Disbursement Administrative/Salary/Overhead: P.O. Box		Category/Type 001	
Candidate Name			
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) C. William R. Darden Jr.			Date of Disbursement MM / DD / YYYY 01 / 31 / 2014
Mailing Address 1311 Sherwood Drive			Amount of Each Disbursement this Period 3000 Transaction ID : B-E-6703
City Johnson City	State TN	Zip Code 37601-3230	
Purpose of Disbursement Administrative/Salary/Overhead: Payroll		Category/Type 001	
Candidate Name			
Office Sought: <input 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: District:			

SUBTOTAL of Disbursements This Page (optional).....	3113.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. William R. Darden Jr.		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1311 Sherwood Drive		Amount of Each Disbursement this Period 12 Transaction ID : B-E-6751
City Johnson City State TN Zip Code 37601-3230	Purpose of Disbursement Breakfast Candidate Name Category/Type 001	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. William R. Darden Jr.		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 1311 Sherwood Drive		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-6758
City Johnson City State TN Zip Code 37601-3230	Purpose of Disbursement Administrative/Salary/Overhead: Payroll Candidate Name Category/Type 001	
Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) C. William R. Darden Jr.		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 1311 Sherwood Drive		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-6801
City Johnson City State TN Zip Code 37601-3230	Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name Category/Type 001	
Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	6012.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 34	
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Phil Roe		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 2 N Crossbow Lane		Amount of Each Disbursement this Period 1090.8
City Johnson City	State TN	
Zip Code 37604-3639	Purpose of Disbursement Reimbursement - Dinner Expense and Gifts of Nominal Value	Transaction ID : B-E-6741
Candidate Name	Category/Type 001	
Office Sought: <input 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)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. U.S. House Of Representatives Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address Longworth Bldg		Amount of Each Disbursement this Period 476.4
City Washington	State DC	
Zip Code 20515-0001	Purpose of Disbursement Gifts of Nominal Value	Transaction ID : B-S-516
Candidate Name	Category/Type 004	
Office Sought: <input 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)	[MEMO ITEM] Subitemization of Phil Roe(01/31/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Trattoria Alberto		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 506 8th Street SE		Amount of Each Disbursement this Period 614.4
City Washington	State DC	
Zip Code 20003-2834	Purpose of Disbursement Dinner Expense	Transaction ID : B-S-518
Candidate Name	Category/Type 001	
Office Sought: <input 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)	[MEMO ITEM] Subitemization of Phil Roe(01/31/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1090.80
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 29 OF 34		
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. John A Teague		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address PO Box 1037		Amount of Each Disbursement this Period 583.84 Transaction ID : B-E-6701
City Jonesborough	State TN	
Zip Code 37659-2037	Purpose of Disbursement Reimbursement - Gifts	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. John A Teague		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address PO Box 1037		Amount of Each Disbursement this Period 32 Transaction ID : B-E-6753
City Jonesborough	State TN	
Zip Code 37659-2037	Purpose of Disbursement Dinner Expense	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Clara Wilson		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 155 Bridgewater Court		Amount of Each Disbursement this Period 645 Transaction ID : B-E-6694
City Gray	State TN	
Zip Code 37615-7003	Purpose of Disbursement Administrative/Salary/Overhead: Rent	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	1260.84
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 30 OF 34			
	<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)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Clara Wilson			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 155 Bridgewater Court			Amount of Each Disbursement this Period 645	
City Gray	State TN	Zip Code 37615-7003	Transaction ID : B-E-6744	
Purpose of Disbursement Administrative/Salary/Overhead: Rent		Category/ Type 001		
Candidate Name				
Office Sought: <input 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: District:				

Full Name (Last, First, Middle Initial) B. Clara Wilson			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014	
Mailing Address 155 Bridgewater Court			Amount of Each Disbursement this Period 645	
City Gray	State TN	Zip Code 37615-7003	Transaction ID : B-E-6805	
Purpose of Disbursement Administrative/Salary/Overhead: Rent		Category/ Type 001		
Candidate Name				
Office Sought: <input 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: District:				

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

SUBTOTAL of Disbursements This Page (optional).....	1290.00
TOTAL This Period (last page this line number only).....	26584.84

**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 31 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS TO ELECT PHIL ROE TO CONGRESS

Full Name (Last, First, Middle Initial) A. Tim Walberg For Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address PO Box 1362		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-6806
City Jackson	State MI	
Purpose of Disbursement Contribution - Tim Walberg for Congress		Category/ Type 011
Candidate Name		
Office Sought: <input 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:	District:	

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

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **CITIZENS TO ELECT PHIL ROE TO CONGRESS** Transaction ID : **SC/10-L1**

LOAN SOURCE Full Name (Last, First, Middle Initial) Phil Roe(Line of Credit)	Election: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2008
Mailing Address 2 N Crossbow Lane	

City	State	ZIP Code
Johnson City	TN	37604-3639

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6900	0	6900

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 31 / Y 2008	M M / D D / On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	6900.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **CITIZENS TO ELECT PHIL ROE TO CONGRESS** Transaction ID : **SC/10-L178**

LOAN SOURCE Full Name (Last, First, Middle Initial) Phil Roe(Line of Credit)	Election: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2008
Mailing Address 2 N Crossbow Lane	

City	State	ZIP Code
Johnson City	TN	37604-3639

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150000	90000	60000

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 / 30 / 2008	On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	60000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **CITIZENS TO ELECT PHIL ROE TO CONGRESS** Transaction ID : **SC/10-L270**

LOAN SOURCE Full Name (Last, First, Middle Initial) Phil Roe(Line of Credit)	Election: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2008
Mailing Address 2 N Crossbow Lane	

City	State	ZIP Code
Johnson City	TN	37604-3639

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000	0	3000

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
01 / 22 / 2008	On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	3000.00
TOTALS This Period (last page in this line only).....	69900.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.