

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))....	10895.98	143067.34
(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)).....	10895.98	143067.34
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	55228.36	142635.17
(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)).....	55228.36	142635.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-516.79	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	5121.01	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

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

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

Write or Type Committee Name
Headrick for Congress

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election) through 11 / 24 / 2014 (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
5245.00	90888.15	600.00
(ii) Unitemized		
2275.00	33091.21	250.00
(iii) Total of contributions from individuals		
7520.00	123979.36	850.00
(b) Political Party Committees		
0.00	4253.00	0.00
(c) Other Political Committees		
3229.00	3150.00	479.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 28

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
146.98	11684.98	8.95
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
10895.98	143067.34	1337.95
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
1100.00	0.00	1100.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
1100.00	0.00	1100.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
11995.98	143067.34	2437.95

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Headrick for Congress

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="55228.36"/>	<input type="text" value="142635.17"/>	<input type="text" value="3386.91"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 28

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

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

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

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

21. OTHER DISBURSEMENTS

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

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

55228.36	142635.17	3386.91
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

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

10895.98	143067.34	1337.95
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IV. NET OPERATING EXPENDITURES

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

55228.36	142635.17	3386.91
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	42715.59
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	11995.98
25. SUBTOTAL (add Line 23 and Line 24).....	54711.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	55228.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	-516.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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. Anonymous Campaign D Anonymous Campaign Donations

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

Mailing Address **P.O. BOX 218**

City **Maynardville** State **TN** Zip Code **37807**

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

Name of Employer **n/a** Occupation **n/a**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1454.39**

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

Transaction ID : SA11AI.6350

Amount of Each Receipt this Period
20.00
 cash, sales tee shirts \$10,\$5 ea, bumper stickers \$1 ea

B. Fred Behringer

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

Mailing Address **933 Fort Wood St**

City **Chattanooga** State **TN** Zip Code **37403**

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

Name of Employer **Not Employed** Occupation **Not Employed**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

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

Transaction ID : SA11AI.5579

Amount of Each Receipt this Period
500.00
 Campaign Donation

C. Paul Campbell

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

Mailing Address **718 S Scenic Highway**

City **Chattanooga** State **TN** Zip Code **37409**

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
10 / 17 / 2014

Transaction ID : SA11AI.5584

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).....

1020.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

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

Mailing Address 12 Highdown Ct

City State Zip Code
Signal Mountain TN 37377

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.5598

Amount of Each Receipt this Period
250.00

Campaign Donation

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

Mailing Address 201 Dark Hollow Rd

City State Zip Code
Andersonville TN 37705

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

Name of Employer Occupation
Self-Employed Graphic Artist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

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

Transaction ID : SA11AI.5671

Amount of Each Receipt this Period
600.00

In-kind - Graphic Arts Help

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

Mailing Address 3185 Reflection Ln

City State Zip Code
Ooltewah TN 37363

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

Name of Employer Occupation
None Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.5604

Amount of Each Receipt this Period
50.00

Campaign Donation

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

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

Mailing Address 2116 Colonial Parkway Dr

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

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

Transaction ID : SA11AI.5288

Amount of Each Receipt this Period
1000.00

Campaign Donation

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

Mailing Address 2116 Colonial Parkway Dr

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

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

Transaction ID : SA11AI.5607

Amount of Each Receipt this Period
0.00

Already Entered in 48 Hour Notice

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

Mailing Address 503 E Brow Rd

City State Zip Code
Lookout Mountain TN 37350

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

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

Transaction ID : SA11AI.5609

Amount of Each Receipt this Period
250.00

Campaign Donation

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Deaderick Montague		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address P.O. BOX		Transaction ID : SA11AI.5335
City Chattanooga	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Sculptor	Campaign Donation
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) B. Deaderick Montague		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address P.O. BOX		Transaction ID : SA11AI.5608
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 in 48 Hour Notice
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) C. Ann Mostoller		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 115 Indian Ln		Transaction ID : SA11AI.5669
City Oak Ridge	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 470.00
Name of Employer Self-Employed	Occupation Attorney	In-kind - For Oak Ridger Ads
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 570.00	

SUBTOTAL of Receipts This Page (optional).....	1470.00
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 11 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

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

Mailing Address 115 Indian Ln

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2014

Transaction ID : SA11AI.5670

Amount of Each Receipt this Period
30.00

In-kind - For Norris Bulletin Ad

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

Mailing Address 1351 Tuskegee Dr

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
Self-Employed Physiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2014

Transaction ID : SA11AI.5611

Amount of Each Receipt this Period
25.00

Campaign Donation

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

Mailing Address 7921 Diamondhead Dr

City State Zip Code
Ooltewah TN 37363

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

Name of Employer Occupation
None Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		19		2014

Transaction ID : SA11AI.5627

Amount of Each Receipt this Period
100.00

Campaign Donation

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

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

155.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 28
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

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

Mailing Address 3630 Glen Oaks Dr

City State Zip Code
Chattanooga TN 37412

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11AI.5628

Amount of Each Receipt this Period
200.00

Campaign Donation

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

Mailing Address 707 Georgia Ave, Suite 302

City State Zip Code
Chattanooga TN 37402

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

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

Transaction ID : SA11AI.5638

Amount of Each Receipt this Period
250.00

Campaign Donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

450.00

5245.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

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

Mailing Address 900 Seventh St NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : SA11C.5568

Amount of Each Receipt this Period
2500.00

Campaign Donation

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

Mailing Address 900 Seventh St NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : SA11C.5338

Amount of Each Receipt this Period
0.00

Already in 48 hour notice

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

Mailing Address 5486 Paint Rock Rd

City Oneida State TN Zip Code 37841

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : SA11C.5675

Amount of Each Receipt this Period
250.00

In-kind - for Scott County Newspaper Ad

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

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

Mailing Address 5486 Paint Rock Rd

City Oneida State TN Zip Code 37841

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **479.00**

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

Transaction ID : SA11C.5677

Amount of Each Receipt this Period
100.00

In-kind - for WBNT Radio Oneida Broadcasters Inc Radio Ad

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

Mailing Address 5486 Paint Rock Rd

City Oneida State TN Zip Code 37841

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **379.00**

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

Transaction ID : SA11C.5678

Amount of Each Receipt this Period
379.00

In-kind - for The Community Shopper Newspaper Ad

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

479.00

3229.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 28
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input 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: 11052.35

Date of Receipt: 10 / 17 / 2014

Transaction ID : SA11D.6378

Amount of Each Receipt this Period: 132.00

In-kind - USPS stamps, Am Ex charge

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: 11058.38

Date of Receipt: 11 / 01 / 2014

Transaction ID : SA11D.6348

Amount of Each Receipt this Period: 6.03

In-kind - Tennessean subscription 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: 1105.03

Date of Receipt: 11 / 18 / 2014

Transaction ID : SA11D.6380

Amount of Each Receipt this Period: 5.03

In-kind - final ATT bill for 423-330-8018 campaign phone

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

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

143.06

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 28
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input 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: 1108.95

Date of Receipt: 11 / 21 / 2014

Transaction ID : SA11D.6381

Amount of Each Receipt this Period: 3.92

In-kind - final ATT bill for 865-992-7168 & 0631

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	3.92
TOTAL This Period (last page this line number only).....	146.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 28
	<input type="checkbox"/> 11a 12 <input 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)
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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 12 / 2014

Transaction ID : SA13A.6302

Amount of Each Receipt this Period
 1100.00

loan to assure no bounced checks while await all posts

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1100.00

1100.00

**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 18 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Headrick for Congress

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

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

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

SUBTOTAL of Disbursements This Page (optional).....	6255.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Dr. Mary M Headrick		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 132.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - USPS stamps, Am Ex charge	Transaction ID : SB17.6379
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) B. Dr. Mary M Headrick		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 6.03
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - Tennessean subscription for issue research	Transaction ID : SB17.6349
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

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

SUBTOTAL of Disbursements This Page (optional).....	207.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 28			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Jim Marziotti		Date of Disbursement MM / DD / YYYY 11 / 06 / 2014
Mailing Address 201 Dark Hollow Rd		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.5672
City Andersonville	State TN	
Purpose of Disbursement In-kind - Graphic Arts Help		Category/ Type 001
Candidate Name Headrick for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) B. Ann Mostoller		Date of Disbursement MM / DD / YYYY 10 / 21 / 2014
Mailing Address 115 Indian Ln		Amount of Each Disbursement this Period 470.00 Transaction ID : SB17.5674
City Oak Ridge	State TN	
Purpose of Disbursement In-kind - For Oak Ridger Ads		Category/ Type 004
Candidate Name Headrick for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) c. Ann Mostoller		Date of Disbursement MM / DD / YYYY 10 / 22 / 2014
Mailing Address 115 Indian Ln		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.5673
City Oak Ridge	State TN	
Purpose of Disbursement In-kind - For Norris Bulletin Ad		Category/ Type 004
Candidate Name Headrick for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 28			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Scott County Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 5486 Paint Rock Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.5681
City Oneida State TN Zip Code 37841	Purpose of Disbursement In-kind - for Scott County Newspaper Ad 004 Category/Type	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) B. Scott County Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 5486 Paint Rock Rd		Amount of Each Disbursement this Period 379.00 Transaction ID : SB17.5679
City Oneida State TN Zip Code 37841	Purpose of Disbursement In-kind - for The Community Shopper Newspaper Ad 004 Category/Type	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) C. WDEF-TV		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 3300 Broad St		Amount of Each Disbursement this Period 3034.50 Transaction ID : SB17.5689
City Chattanooga State TN Zip Code 37408	Purpose of Disbursement TV Ads 004 Category/Type	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

SUBTOTAL of Disbursements This Page (optional).....	3663.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 28			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Headrick for Congress

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

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

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

SUBTOTAL of Disbursements This Page (optional).....	4428.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 28			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

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

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

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

SUBTOTAL of Disbursements This Page (optional).....	3990.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 28			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Headrick for Congress

Full Name (Last, First, Middle Initial) A. Zoo Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 5700 Bandini Blvd		Amount of Each Disbursement this Period 3656.51
City Commerce State CA Zip Code 90040	Purpose of Disbursement pay debt to headrick for zoo printing charge, part of \$35000 ck	
Candidate Name Headrick for Congress		Transaction ID : SB17.6313
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	Category/Type 004	

Full Name (Last, First, Middle Initial) B. Zoo Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 5700 Bandini Blvd		Amount of Each Disbursement this Period 31343.49
City Commerce State CA Zip Code 90040	Purpose of Disbursement postage fee for 4th postcard mailer, electronic xfer, part ck 634 of \$35,000	
Candidate Name Headrick for Congress		Transaction ID : SB17.6346
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	Category/Type 004	

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

SUBTOTAL of Disbursements This Page (optional).....	35000.00
TOTAL This Period (last page this line number only).....	54645.45

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **Headrick for Congress** Transaction ID : **SC/10.6302**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. Mary M Headrick	[PERSONAL FUNDS]	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. BOX 218		

City	State	ZIP Code
Maynardville	TN	37807-0218

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1100.00	0.00	1100.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
11 / 12 / 2014	12/31/2014	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).....	▶	1100.00
TOTALS This Period (last page in this line only).....	▶	1100.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 28
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Headrick for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast TV	Nature of Debt (Purpose): Comcast TV ad time,am ex charge
Mailing Address 2030 Hamilton PI Blvd Suite 300	
City State Zip Code Chattanooga TN 37421	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6037	
Amount Incurred This Period 1195.10	Payment This Period 0.00	Outstanding Balance at Close of This Period 1195.10

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP VAN	Nature of Debt (Purpose): robocalls,NGPVAN,amex charge
Mailing Address 48 Grove St, Suite 202	
City State Zip Code Somerville MA 02144-3132	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6035	
Amount Incurred This Period 300.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP VAN	Nature of Debt (Purpose): robocalls,NPGVAN,charge to amex
Mailing Address 48 Grove St, Suite 202	
City State Zip Code Somerville MA 02144-3132	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6036	
Amount Incurred This Period 1316.37	Payment This Period 0.00	Outstanding Balance at Close of This Period 1316.37

1) SUBTOTALS This Period This Page (optional)	2811.47
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Headrick for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zoo Printing		Nature of Debt (Purpose): mailer printing post card mailer 4 ZooPrinting,amex charge
Mailing Address 5700 Bandini Blvd		
City	State	Zip Code
Commerce	CA	90040

Outstanding Balance Beginning This Period	Transaction ID : SD10.6023	
<input type="text" value="4693.67"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="3656.51"/>	<input type="text" value="1037.16"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zoo Printing		Nature of Debt (Purpose): postage last mailer,ZooPrinting, electronic xfer postage mailer 4
Mailing Address 5700 Bandini Blvd		
City	State	Zip Code
Commerce	CA	90040

Outstanding Balance Beginning This Period	Transaction ID : SD10.6027	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="31343.49"/>	<input type="text" value="31343.49"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zoo Printing		Nature of Debt (Purpose): ship xtra cards,ZooPrinting,am ex charge
Mailing Address 5700 Bandini Blvd		
City	State	Zip Code
Commerce	CA	90040

Outstanding Balance Beginning This Period	Transaction ID : SD10.6031	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="40.35"/>	<input type="text" value="0.00"/>	<input type="text" value="40.35"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1077.51"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Headrick for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zoo Printing		Nature of Debt (Purpose): shipping post cards by ZooPrinting, amex charge
Mailing Address 5700 Bandini Blvd		
City State Commerce CA	Zip Code 90040	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6033	
Amount Incurred This Period 132.03	Payment This Period 0.00	Outstanding Balance at Close of This Period 132.03

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	132.03
2) TOTALS This Period (last page this line number only)	4021.01
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	1100.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	5121.01