



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Rock City PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		222547.95
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	169731.67									
(c) Total Receipts (from Line 19) .....	90917.77	91997.71								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	260649.44	314545.66								
7. Total Disbursements (from Line 31) .....	44123.22	98019.44								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	216526.22	216526.22								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Rock City PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	79500.00	79500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	79500.00	79500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	84500.00	84500.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	435.60	435.60
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	982.17	2062.11
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	90917.77	91997.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	90917.77	91997.71

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	34123.22	48019.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	34123.22	48019.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	10000.00	50000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	44123.22	98019.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44123.22	98019.44

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	84500.00	84500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	84500.00	84500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	34123.22	48019.44
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	435.60	435.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	33687.62	47583.84

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 35  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)  
Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Davenport, III

Mailing Address 216 W Brow Rd

City State Zip Code  
Lookout Mountain TN 37350-1310

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

Name of Employer Occupation  
Pointer Management Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2009

Transaction ID: 90704.C31525

Amount of Each Receipt this Period  
5000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Robert McCabe

Mailing Address 4418 Herbert Pl

City State Zip Code  
Nashville TN 37215-4544

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

Name of Employer Occupation  
Pinnacle Financial Partners Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2009

Transaction ID: 90524.C30194

Amount of Each Receipt this Period  
2000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Lewis Conner

Mailing Address 101 Abbottsford

City State Zip Code  
Nashville TN 37215-2437

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

Name of Employer Occupation  
Waller Lansden Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

Transaction ID: 90524.C30188

Amount of Each Receipt this Period  
5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 35  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.**

Full Name (Last, First, Middle Initial) Raja Jubran		Date of Receipt MM / DD / YYYY 05 / 08 / 2009
Mailing Address 1635 Western Ave		<b>Transaction ID:</b> 90524.C30195
City Knoxville	State TN	Zip Code 37921-6700
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Denark Construction	Occupation CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**B.**

Full Name (Last, First, Middle Initial) John McDonald		Date of Receipt MM / DD / YYYY 06 / 01 / 2009
Mailing Address 615 Lindsay St Suite 410		<b>Transaction ID:</b> 90704.C31524
City Chattanooga	State TN	Zip Code 37403-3407
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer self	Occupation Architect	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**C.**

Full Name (Last, First, Middle Initial) Andrew W. Miller		Date of Receipt MM / DD / YYYY 04 / 20 / 2009
Mailing Address 210 Burlington Pl		<b>Transaction ID:</b> 90524.C30192
City Nashville	State TN	Zip Code 37215-1845
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Healthmark Ventures LLC	Occupation Executive	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>15000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 35  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)  
Martha Ingram

Mailing Address 120 Hillwood Blvd

City Nashville State TN Zip Code 37205-2812

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

Name of Employer Ingram Industries Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 19 / 2009  
**Transaction ID:** 90524.C30200  
 Amount of Each Receipt this Period: 5000.00  
 Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Robert Lipman

Mailing Address 411 Great Circle Rd

City Nashville State TN Zip Code 37228-1403

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

Name of Employer Lipman Bros. Occupation Distributor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 05 / 19 / 2009  
**Transaction ID:** 90524.C30199  
 Amount of Each Receipt this Period: 5000.00  
 Receipt

**C.**

Full Name (Last, First, Middle Initial)  
James D. Blalock

Mailing Address 1801 Winfield Dunn Pkwy

City Sevierville State TN Zip Code 37876-1509

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

Name of Employer Blalock & Sons Occupation Construction

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 06 / 30 / 2009  
**Transaction ID:** 90704.C31528  
 Amount of Each Receipt this Period: 5000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

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

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

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

FOR LINE NUMBER: PAGE 9 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Rock City PAC

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

Mailing Address 136 Sassafrass Way

City State Zip Code  
Signal Mountain TN 37377

FEC ID number of contributing federal political committee. C

Name of Employer RPM & Associates      Occupation Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2500.00

Date of Receipt  
05 / 11 / 2009  
**Transaction ID:** 90524.C30196  
 Amount of Each Receipt this Period  
2500.00  
 Receipt

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

Mailing Address 523 Fleetwood Dr.

City State Zip Code  
Lookout Mountain TN 37350-1465

FEC ID number of contributing federal political committee. C

Name of Employer N/A      Occupation Homemaker

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5000.00

Date of Receipt  
06 / 01 / 2009  
**Transaction ID:** 90704.C31520  
 Amount of Each Receipt this Period  
5000.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
L. H. Caldwell, III

Mailing Address 523 Fleetwood Dr

City State Zip Code  
Lookout Mountain TN 37350-1465

FEC ID number of contributing federal political committee. C

Name of Employer self      Occupation Investment Manager

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5000.00

Date of Receipt  
06 / 01 / 2009  
**Transaction ID:** 90704.C31521  
 Amount of Each Receipt this Period  
5000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 12500.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.** Full Name (Last, First, Middle Initial)  
Thomas Allen Lupton, Jr.  
Mailing Address 1 Fort Stephenson Pl  
City Lookout Mountain State TN Zip Code 37350-1313  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt 05 / 04 / 2009  
Transaction ID: 90704.C31533  
Amount of Each Receipt this Period 1500.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
William E. Young  
Mailing Address 2502 Fox Run Dr.  
City Signal Mountain State TN Zip Code 37377-1464  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Blue Cross Blue Shield Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 06 / 01 / 2009  
Transaction ID: 90704.C31523  
Amount of Each Receipt this Period 1000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
John R. Ingram  
Mailing Address 1214 Chickering Rd  
City Nashville State TN Zip Code 37215-4551  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ingram Book Group Occupation Chairman  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 05 / 19 / 2009  
Transaction ID: 90524.C30198  
Amount of Each Receipt this Period 5000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 35  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.**

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

Mailing Address 5645 Murray Rd

City State Zip Code  
Memphis TN 38119-3831

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

Name of Employer Occupation  
Century Management Inc. Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

**Transaction ID:** 90524.C30193

Amount of Each Receipt this Period  
2000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
John Sangervasi

Mailing Address 1104 Belle Meade Blvd

City State Zip Code  
Nashville TN 37205-4506

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

Name of Employer Occupation  
Robert Baird Co. Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2009

**Transaction ID:** 90704.C31522

Amount of Each Receipt this Period  
2500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
William F. Hagerty

Mailing Address 4362 Chickering Ln

City State Zip Code  
Nashville TN 37215-4918

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

Name of Employer Occupation  
Hagerty Peterson & Co. Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

**Transaction ID:** 90524.C30190

Amount of Each Receipt this Period  
5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **9500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 35  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)  
Gene D. Carlisle

Mailing Address 5855 Fairwood Ln

City Memphis State TN Zip Code 38120-3029

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

Name of Employer Carlisle Corporation Occupation Chairman/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 04 / 20 / 2009

Transaction ID: 90524.C30187

Amount of Each Receipt this Period 2000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Joey Jacobs

Mailing Address 9229 Hunterboro Dr

City Brentwood State TN Zip Code 37027-6104

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

Name of Employer Psychiatric Solutions Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 20 / 2009

Transaction ID: 90524.C30191

Amount of Each Receipt this Period 5000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Douglas W. Ferris, Jr.

Mailing Address 40 S Rose Rd

City Memphis State TN Zip Code 38117-2902

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

Name of Employer self Occupation Businessman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 20 / 2009

Transaction ID: 90524.C30189

Amount of Each Receipt this Period 1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 8000.00

**TOTAL** This Period (last page this line number only) ..... ► 79500.00

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

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

FOR LINE NUMBER: PAGE 13 / 35

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)  
Altria Group, Inc. PAC

Mailing Address Ms. Cindy Hayden  
101 Constitution Ave NW Ste 400W

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

Transaction ID: 90704.C31527

Amount of Each Receipt this Period

2500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Soc. of Ind. Gasoline Marketers PAC

Mailing Address Mr. Kenneth A. Doyle  
3930 Pender Drive, Suite 340

City State Zip Code  
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C** C00120030

Name of Employer Occupation  
N/A N/A

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 9

Transaction ID: 90704.C31526

Amount of Each Receipt this Period

2500.00

Receipt

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

5000.00

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

5000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 35  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	--	-----------------------------	-----------------------------

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)  
Rock City PAC

A.

Full Name (Last, First, Middle Initial)  
South Carolina Republican Party

Mailing Address 1913 Marion Street, Suite 101 B

City	State	Zip Code
Columbia	SC	29201-

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

Name of Employer	Occupation

Receipt For:

Primary  General

Other (specify) ▼

Aggregate Year-to-Date ▼

435.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	9	/	2	0	0	9

Transaction ID: 90524.C30201

Amount of Each Receipt this Period

435.60

Offsets to Operating Expenditure

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	435.60
<b>TOTAL</b> This Period (last page this line number only) .....	▶	435.60

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

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

FOR LINE NUMBER: PAGE 15 / 35  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)  
Citizens for Arlen Specter

Mailing Address 255 South 17th Street, Suite 603

City Philadelphia State PA Zip Code 19103-

FEC ID number of contributing federal political committee. **C** C00280206

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 9

Transaction ID: 90524.C30197

Amount of Each Receipt this Period  
5000.00

Refund of Contribution Made

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00

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

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

FOR LINE NUMBER: PAGE 16 / 35  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.** Full Name (Last, First, Middle Initial)  
Pinnacle Bank

Mailing Address 211 Commerce St  
Suite 300

City Nashville State TN Zip Code 37201-1806

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

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1374.70

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 4 / 2 0 0 9

**Transaction ID:** 90704.C31529

Amount of Each Receipt this Period 294.76

Interest Received

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

Mailing Address 211 Commerce St  
Suite 300

City Nashville State TN Zip Code 37201-1806

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

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.32

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 9

**Transaction ID:** 90704.C31530

Amount of Each Receipt this Period 275.62

Interest Received

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

Mailing Address 211 Commerce St  
Suite 300

City Nashville State TN Zip Code 37201-1806

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

Name of Employer N/A Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2062.11

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 5 / 2 0 0 9

**Transaction ID:** 90704.C31531

Amount of Each Receipt this Period 411.79

Interest Received

**SUBTOTAL** of Receipts This Page (optional) ..... ► 982.17

**TOTAL** This Period (last page this line number only) ..... ► 982.17

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Cardmember Service</p> <p>Mailing Address PO Box 790408</p> <p>City Saint Louis State MO Zip Code 63179-0408</p> <p>Purpose of Disbursement CREDIT CARD: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90704.E4037 <b>Date of Disbursement</b> 06 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 3965.17</p> <p>CREDIT CARD: SEE BELOW</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Alleia Restuarant</p> <p>Mailing Address 25 East Main Street</p> <p>City Chattanooga State TN Zip Code 37401-</p> <p>Purpose of Disbursement Event Expense - not candidate speci</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90704.E4066 <b>Date of Disbursement</b> 05 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 141.54</p> <p><b>[MEMO ITEM]</b> MEMO: EVENT EXPENSE - NOT CANDIDATE SPECI</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Aristotle International, Inc.</p> <p>Mailing Address 2285 Peachtree Rd NE</p> <p>City Atlanta State GA Zip Code 30309-1119</p> <p>Purpose of Disbursement PAC Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90705.E4102 <b>Date of Disbursement</b> 06 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 1094.22</p> <p><b>[MEMO ITEM]</b> MEMO: PAC SOFTWARE</p>

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

3965.17

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Capitol Prompting Services Mailing Address 639 South 20th Street, LL City Arlington State VA Zip Code 22202- Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4074 Date of Disbursement 05 / 17 / 2009
	Amount of Each Disbursement this Period 1000.00 [MEMO ITEM] MEMO: EVENT EXPENSE

<b>B.</b> Full Name (Last, First, Middle Initial) Dirksen South Mailing Address First & Constitution City Washington State DC Zip Code 20001- Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4071 Date of Disbursement 05 / 13 / 2009
	Amount of Each Disbursement this Period 38.50 [MEMO ITEM] MEMO: MEALS

<b>C.</b> Full Name (Last, First, Middle Initial) Dirksen South Mailing Address First & Constitution City Washington State DC Zip Code 20001- Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4067 Date of Disbursement 05 / 06 / 2009
	Amount of Each Disbursement this Period 40.00 [MEMO ITEM] MEMO: MEALS

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 35

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

A.	Full Name (Last, First, Middle Initial) Dirksen South	Transaction ID: 90704.E4078 Date of Disbursement 06 / 02 / 2009
	Mailing Address First & Constitution	Amount of Each Disbursement this Period 39.00
	City Washington State DC Zip Code 20001-	
	Purpose of Disbursement Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: MEALS

B.	Full Name (Last, First, Middle Initial) Monocole Restaurant	Transaction ID: 90704.E4079 Date of Disbursement 06 / 03 / 2009
	Mailing Address 107 D St NE	Amount of Each Disbursement this Period 87.92
	City Washington State DC Zip Code 20002-5613	
	Purpose of Disbursement Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: MEALS

C.	Full Name (Last, First, Middle Initial) Pilot Travel Center	Transaction ID: 90706.E4103 Date of Disbursement 05 / 18 / 2009
	Mailing Address 915 Sevier Ave	Amount of Each Disbursement this Period 44.99
	City Knoxville State TN Zip Code 37920-1862	
	Purpose of Disbursement Fuel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: FUEL

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

A.

Full Name (Last, First, Middle Initial)  
Pilot Travel Center

Mailing Address 915 Sevier Ave

City Knoxville State TN Zip Code 37920-1862

Purpose of Disbursement  
Fuel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 90704.E4065  
Date of Disbursement

05 / 15 / 2009

Amount of Each Disbursement this Period

27.10

[MEMO ITEM]  
MEMO: FUEL

B.

Full Name (Last, First, Middle Initial)  
Schneiders of Capitol Hill

Mailing Address 300 Massachusetts Ave NE

City Washington State DC Zip Code 20002-5702

Purpose of Disbursement  
Event Expense

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 90704.E4080  
Date of Disbursement

06 / 05 / 2009

Amount of Each Disbursement this Period

94.99

[MEMO ITEM]  
MEMO: EVENT EXPENSE

C.

Full Name (Last, First, Middle Initial)  
U.S. Airways

Mailing Address 2345 Crystal Dr

City Arlington State VA Zip Code 22227-0001

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 90704.E4077  
Date of Disbursement

05 / 28 / 2009

Amount of Each Disbursement this Period

410.60

[MEMO ITEM]  
MEMO: TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 35

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

A.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4070 Date of Disbursement 05 / 12 / 2009
	Mailing Address Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 92.10
	City Washington State DC Zip Code 20510-	
	Purpose of Disbursement Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: MEALS

B.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4068 Date of Disbursement 05 / 06 / 2009
	Mailing Address Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 260.00
	City Washington State DC Zip Code 20510-	
	Purpose of Disbursement TN Tuesday Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: TN TUESDAY MEALS

C.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4072 Date of Disbursement 05 / 13 / 2009
	Mailing Address Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 306.00
	City Washington State DC Zip Code 20510-	
	Purpose of Disbursement TN Tuesday Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: TN TUESDAY MEALS

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 22 / 35

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Landmarc Enterprises</p> <p>Mailing Address 84-10 120th Street, Suite #1D</p> <p>City Kew Gardens State NY Zip Code 11415-</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90704.E4097 <b>Date of Disbursement</b> 06 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 1926.40</p> <p>TRAVEL</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dennis L. Fernald</p> <p>Mailing Address 6922 Mahlon Dr</p> <p>City Harrison State TN Zip Code 37341-9601</p> <p>Purpose of Disbursement Pilot Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90704.E4090 <b>Date of Disbursement</b> 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 487.12</p> <p>PILOT SERVICES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cardmember Service</p> <p>Mailing Address PO Box 790408</p> <p>City Saint Louis State MO Zip Code 63179-0408</p> <p>Purpose of Disbursement CREDIT CARD: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90704.E4035 <b>Date of Disbursement</b> 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 2906.94</p> <p>CREDIT CARD: SEE BELOW</p>

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

5320.46

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 35

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

<b>A.</b> Full Name (Last, First, Middle Initial) The Caucus Room Mailing Address 401 9th St NW City Washington State DC Zip Code 20004-2127 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4046 Date of Disbursement 03 / 25 / 2009
	Amount of Each Disbursement this Period 130.80 [MEMO ITEM] MEMO: MEALS

<b>B.</b> Full Name (Last, First, Middle Initial) Dirksen South Mailing Address First & Constitution City Washington State DC Zip Code 20001- Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4044 Date of Disbursement 03 / 26 / 2009
	Amount of Each Disbursement this Period 38.50 [MEMO ITEM] MEMO: MEALS

<b>C.</b> Full Name (Last, First, Middle Initial) Hunan Dynasty Restaurant Mailing Address 215 Pennsylvania Ave SE #2 City Washington State DC Zip Code 20003- Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4049 Date of Disbursement 04 / 02 / 2009
	Amount of Each Disbursement this Period 156.90 [MEMO ITEM] MEMO: MEALS

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

A.	Full Name (Last, First, Middle Initial) Monocole Restaurant	Transaction ID: 90704.E4048 Date of Disbursement 03 / 25 / 2009
	Mailing Address 107 D St NE	Amount of Each Disbursement this Period 25.00
	City Washington State DC Zip Code 20002-5613	
	Purpose of Disbursement Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: MEALS

B.	Full Name (Last, First, Middle Initial) Monocole Restaurant	Transaction ID: 90704.E4045 Date of Disbursement 03 / 31 / 2009
	Mailing Address 107 D St NE	Amount of Each Disbursement this Period 119.94
	City Washington State DC Zip Code 20002-5613	
	Purpose of Disbursement Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: MEALS

C.	Full Name (Last, First, Middle Initial) Swiftys	Transaction ID: 90704.E4039 Date of Disbursement 04 / 07 / 2009
	Mailing Address 1007 Lexington Avenue	Amount of Each Disbursement this Period 613.25
	City New York State NY Zip Code 10021-	
	Purpose of Disbursement Event Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: EVENT EXPENSE

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

A.	Full Name (Last, First, Middle Initial) U.S. Airways	Transaction ID: 90704.E4038 Date of Disbursement 04 / 06 / 2009
	Mailing Address 2345 Crystal Dr	Amount of Each Disbursement this Period 358.20
	City Arlington State VA Zip Code 22227-0001	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: TRAVEL

B.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4041 Date of Disbursement 03 / 17 / 2009
	Mailing Address Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 389.00
	City Washington State DC Zip Code 20510-	
	Purpose of Disbursement TN Tuesday Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: TN TUESDAY MEALS

C.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4043 Date of Disbursement 03 / 23 / 2009
	Mailing Address Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 195.00
	City Washington State DC Zip Code 20510-	
	Purpose of Disbursement TN Tuesday Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: TN TUESDAY MEALS

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

A.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4042 Date of Disbursement 03 / 19 / 2009
	Mailing Address: Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 637.00
	City: Washington State: DC Zip Code: 20510-	
	Purpose of Disbursement: TN Tuesday Meals Candidate Name:	Category/Type:
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: TN TUESDAY MEALS

B.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4047 Date of Disbursement 03 / 31 / 2009
	Mailing Address: Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 155.00
	City: Washington State: DC Zip Code: 20510-	
	Purpose of Disbursement: TN Tuesday Meals Candidate Name:	Category/Type:
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: TN TUESDAY MEALS

C.	Full Name (Last, First, Middle Initial) Mr. Thomas J. Ingram	Transaction ID: 90704.E4092 Date of Disbursement 05 / 11 / 2009
	Mailing Address: 7305 Lorimar PI	Amount of Each Disbursement this Period 3000.00
	City: Knoxville State: TN Zip Code: 37919-8168	
	Purpose of Disbursement: Consulting Services - not candidate Candidate Name:	Category/Type:
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CONSULTING SERVICES - NOT CANDIDATE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Cardmember Service</p> <p>Mailing Address PO Box 790408</p> <p>City Saint Louis State MO Zip Code 63179-0408</p> <p>Purpose of Disbursement CREDIT CARD: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90704.E4036 <b>Date of Disbursement</b> 05 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 7100.94</p> <p>CREDIT CARD: SEE BELOW</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) 701 Restaurant</p> <p>Mailing Address 701 Pennsylvania Avenue, NW</p> <p>City Washington State DC Zip Code 20004-</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90704.E4062 <b>Date of Disbursement</b> 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 267.20</p> <p><b>[MEMO ITEM]</b> MEMO: MEALS</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address 2500 Victory Ave</p> <p>City Dallas State TX Zip Code 75219-7601</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90704.E4051 <b>Date of Disbursement</b> 04 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 365.60</p> <p><b>[MEMO ITEM]</b> MEMO: TRAVEL</p>

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

7100.94

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

A.	Full Name (Last, First, Middle Initial) Dirksen South	Transaction ID: 90704.E4055 Date of Disbursement 04 / 22 / 2009
	Mailing Address First & Constitution	Amount of Each Disbursement this Period 58.00
	City Washington State DC Zip Code 20001-	
	Purpose of Disbursement Meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: MEALS

B.	Full Name (Last, First, Middle Initial) Essex House	Transaction ID: 90704.E4050 Date of Disbursement 04 / 07 / 2009
	Mailing Address 160 Central Park S	Amount of Each Disbursement this Period 321.23
	City New York State NY Zip Code 10019-	
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: TRAVEL

C.	Full Name (Last, First, Middle Initial) Liaison Capitol Hill	Transaction ID: 90704.E4063 Date of Disbursement 05 / 02 / 2009
	Mailing Address 500 Indiana Ave, NW	Amount of Each Disbursement this Period 273.66
	City Washington State DC Zip Code 20001-	
	Purpose of Disbursement Travel Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**  
MEMO: TRAVEL EXPENSE

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

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

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Monocole Restaurant Mailing Address 107 D St NE City Washington State DC Zip Code 20002-5613 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4064 Date of Disbursement 04 / 28 / 2009 Amount of Each Disbursement this Period 43.70 [MEMO ITEM] MEMO: MEALS
	Category/Type	[ ]

<b>B.</b> Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address 2702 Love Field Dr City Dallas State TX Zip Code 75235-1908 Purpose of Disbursement Airline Ticket Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4057 Date of Disbursement 04 / 24 / 2009 Amount of Each Disbursement this Period 371.70 [MEMO ITEM] MEMO: AIRLINE TICKET
	Category/Type	[ ]

<b>C.</b> Full Name (Last, First, Middle Initial) St. Regis Hotel Mailing Address Two East 55th Street City New York State NY Zip Code 10022- Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4053 Date of Disbursement 04 / 06 / 2009 Amount of Each Disbursement this Period 193.48 [MEMO ITEM] MEMO: MEALS
	Category/Type	[ ]

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

A.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4056 Date of Disbursement 04 / 22 / 2009
	Mailing Address: Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 331.00
	City: Washington State: DC Zip Code: 20510-	
	Purpose of Disbursement: TN Tuesday Meals	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
		<b>[MEMO ITEM]</b> MEMO: TN TUESDAY MEALS

B.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4054 Date of Disbursement 04 / 21 / 2009
	Mailing Address: Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 51.51
	City: Washington State: DC Zip Code: 20510-	
	Purpose of Disbursement: Meals	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
		<b>[MEMO ITEM]</b> MEMO: MEALS

C.	Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4061 Date of Disbursement 04 / 30 / 2009
	Mailing Address: Dirksen Office Bldg, SDG-55 First & C Streets, Northeast	Amount of Each Disbursement this Period 562.00
	City: Washington State: DC Zip Code: 20510-	
	Purpose of Disbursement: TN Tuesday Meals	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
		<b>[MEMO ITEM]</b> MEMO: TN TUESDAY MEALS

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

<b>A.</b> Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4058 Date of Disbursement MM / DD / YYYY 04 / 23 / 2009
	Mailing Address: Dirksen Office Bldg, SDG-55 First & C Streets, Northeast City: Washington State: DC Zip Code: 20510- Purpose of Disbursement: TN Tuesday Meals 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: _____
Amount of Each Disbursement this Period 179.00	
<b>[MEMO ITEM]</b> MEMO: TN TUESDAY MEALS	

<b>B.</b> Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4060 Date of Disbursement MM / DD / YYYY 04 / 28 / 2009
	Mailing Address: Dirksen Office Bldg, SDG-55 First & C Streets, Northeast City: Washington State: DC Zip Code: 20510- Purpose of Disbursement: TN Tuesday Meals 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: _____
Amount of Each Disbursement this Period 260.00	
<b>[MEMO ITEM]</b> MEMO: TN TUESDAY MEALS	

<b>C.</b> Full Name (Last, First, Middle Initial) U.S. Senate Restaurant	Transaction ID: 90704.E4059 Date of Disbursement MM / DD / YYYY 04 / 23 / 2009
	Mailing Address: Dirksen Office Bldg, SDG-55 First & C Streets, Northeast City: Washington State: DC Zip Code: 20510- Purpose of Disbursement: TN Tuesday Meals 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: _____
Amount of Each Disbursement this Period 218.00	
<b>[MEMO ITEM]</b> MEMO: TN TUESDAY MEALS	

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

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

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Watermark Restaurant Mailing Address 507 12th Avenue South City Nashville State TN Zip Code 37203- Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4052 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 3556.40 [MEMO ITEM] MEMO: EVENT EXPENSE

<b>B.</b> Full Name (Last, First, Middle Initial) Restaurant Associates Mailing Address Dirksen Senate Office Bldg, SDB-04 City Washington State DC Zip Code 20510- Purpose of Disbursement Steering Committee Lunch Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4091 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 700.00 STEERING COMMITTEE LUNCH

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Thomas J. Ingram Mailing Address 7305 Lorimar PI City Knoxville State TN Zip Code 37919-8168 Purpose of Disbursement Consulting Services - not candidate Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E4093 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 6000.00 CONSULTING SERVICES - NOT CANDIDATE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.** Full Name (Last, First, Middle Initial)  
Sue Rankin

Mailing Address 320 Lynnwood Blvd

City Nashville State TN Zip Code 37205-2927

Purpose of Disbursement  
GOP Speech Preparation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90704.E4094  
Date of Disbursement  
05 / 18 / 2009

Amount of Each Disbursement this Period  
2350.00

Category/Type  
GOP SPEECH PREPARATION

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

Mailing Address 25 East Main Street

City Chattanooga State TN Zip Code 37401-

Purpose of Disbursement  
Event Expense - not candidate speci

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90704.E4095  
Date of Disbursement  
05 / 18 / 2009

Amount of Each Disbursement this Period  
1794.13

Category/Type  
EVENT EXPENSE - NOT CANDI-  
DATE SPECI

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

Mailing Address 1200 Ridgetop Dr

City Chattanooga State TN Zip Code 37421-4056

Purpose of Disbursement  
Pilot Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 90704.E4089  
Date of Disbursement  
04 / 20 / 2009

Amount of Each Disbursement this Period  
450.00

Category/Type  
PILOT SERVICES

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 4594.13

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
Rock City PAC

A.	Full Name (Last, First, Middle Initial) Kaegi Resources	Transaction ID: 90704.E4101 Date of Disbursement 06 / 30 / 2009
	Mailing Address 1015 Stonebridge Park Dr	Amount of Each Disbursement this Period 3000.00
	City Franklin State TN Zip Code 37069-4001	
	Purpose of Disbursement PAC Fundraising Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC FUNDRAISING

B.	Full Name (Last, First, Middle Initial) Image Works Printing	Transaction ID: 90704.E4099 Date of Disbursement 06 / 26 / 2009
	Mailing Address 1800 Rossville Avenue	Amount of Each Disbursement this Period 429.52
	City Chattanooga State TN Zip Code 37408-3035	
	Purpose of Disbursement Printing - not candidate specific Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PRINTING - NOT CANDIDATE SPECIFIC

SUBTOTAL of Disbursements This Page (optional) .....	3429.52
TOTAL This Period (last page this line number only) .....	34110.22

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)  
Friends of Roy Blunt

Mailing Address P.O. Box 50100

City Springfield State MO Zip Code 65805-

Purpose of Disbursement  
CONTRIBUTION TO FED COMM

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 90704.E4096  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

CONTRIBUTION TO FED COMM

**B.**

Full Name (Last, First, Middle Initial)  
Friends of John Thune

Mailing Address 200 North Phillips Avenue, Suite L

City Sioux Falls State SD Zip Code 57104-

Purpose of Disbursement  
CONTRIBUTION TO FED COMM

Candidate Name  
JOHN THUNE

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2004  
 Primary  General  
 Other (specify) ▼

State: SD District: 00

Transaction ID: 90704.E4098  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

CONTRIBUTION TO FED COMM

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

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