

# 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

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
07 / 19 / 2014

through

M M / D D / Y Y Y Y  
09 / 30 / 2014

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 Detlef Matt

Signature of Treasurer

Detlef Matt

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
02 / 01 / 2015

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

Office Use Only

FEC FORM 3  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**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))....	43466.04	109011.99
(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)).....	43466.04	109011.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	35822.04	54970.42
(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)).....	35822.04	54970.42
8. Cash on Hand at Close of Reporting Period (from Line 27).....	54041.57	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Headrick for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	25258.15	72343.15
(ii) Unitemized.....	10590.89	26796.21
(iii) TOTAL of contributions from individuals ▶	35849.04	99139.36
(b) Political Party Committees.....	7217.00	7217.00
(c) Other Political Committees (such as PACs).....	400.00	400.00
(d) The Candidate.....	0.00	2255.63
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	43466.04	109011.99
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	43466.04	109011.99

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35822.04	54970.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	35822.04	54970.42

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	46397.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	43466.04
25. SUBTOTAL (add Line 23 and Line 24).....	89863.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35822.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	54041.57

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address P.O. BOX 15367

City: Chattanooga State: TN Zip Code: 37415

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

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 12 / 2014

**Transaction ID : SA11AI.4778**

Amount of Each Receipt this Period: 200.00

Campaign Donation

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

Mailing Address P.O. BOX 15367

City: Chattanooga State: TN Zip Code: 37415

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

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 09 / 05 / 2014

**Transaction ID : SA11AI.4779**

Amount of Each Receipt this Period: 200.00

Campaign Donation

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

Mailing Address 905 Oak St

City: Chattanooga State: TN Zip Code: 37403

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

Name of Employer: None Occupation: Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 21 / 2014

**Transaction ID : SA11AI.4791**

Amount of Each Receipt this Period: 150.00

Campaign Donation

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 6 OF 68  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

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

Mailing Address 905 Oak St

City State Zip Code  
Chattanooga TN 37403

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  
250.00

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

**Transaction ID : SA11AI.4792**

Amount of Each Receipt this Period  
 150.00

Campaign Donation

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

Mailing Address 1206 Ingleside Ave NE

City State Zip Code  
Athens TN 37303

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  
400.00

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

**Transaction ID : SA11AI.4796**

Amount of Each Receipt this Period  
 150.00

Campaign Donation

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

Mailing Address 1206 Ingleside Ave NE

City State Zip Code  
Athens TN 37303

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  
400.00

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

**Transaction ID : SA11AI.4797**

Amount of Each Receipt this Period  
 150.00

Campaign Donation

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 273 Arrowhead Trl

City Kingston State TN Zip Code 37763

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : SA11AI.4800**

Amount of Each Receipt this Period  
100.00

Campaign Donation

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

Mailing Address 4315 Hiawatha Dr

City Knoxville State TN Zip Code 37919

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.4816**

Amount of Each Receipt this Period  
250.00

Campaign Donation

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

Mailing Address 1418 Winding Way

City Chattanooga State TN Zip Code 37405

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

Name of Employer St. Nicholas School Occupation Teacher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.4822**

Amount of Each Receipt this Period  
1000.00

Campaign Donation

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

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

Mailing Address 502 Lullwater Rd

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4833**

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

In-kind - Uline Hanger Bags for 8/25 Kickoff

**[MEMO ITEM]**

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

Mailing Address 502 Lullwater Rd

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.4836**

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

In-kind - City of Chattanooga Room Rental for 8/25 Kickoff

**[MEMO ITEM]**

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

Mailing Address 502 Lullwater Rd

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

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

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

**Transaction ID : SA11AI.4829**

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

In-kind - Facebook Boosting

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

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

\_\_\_\_\_ 270.38

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

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

Mailing Address 502 Lullwater Rd

City: Chattanooga State: TN Zip Code: 37405

FEC ID number of contributing federal political committee: C

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 659.15

Date of Receipt: 09 / 30 / 2014

**Transaction ID : SA11AI.4832**

Amount of Each Receipt this Period: 388.77

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

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

Mailing Address 502 Lullwater Rd

City: Chattanooga State: TN Zip Code: 37405

FEC ID number of contributing federal political committee: C

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 659.15

Date of Receipt: 09 / 30 / 2014

**Transaction ID : SA11AI.4838**

Amount of Each Receipt this Period: 65.28

In-kind - Pizza Hut Catering for Phone Banking Event

**[MEMO ITEM]**

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

Mailing Address 1204 Hanover St

City: Chattanooga State: TN Zip Code: 37405

FEC ID number of contributing federal political committee: C

Name of Employer: Requested Information Occupation: Requested Information

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 25 / 2014

**Transaction ID : SA11AI.4857**

Amount of Each Receipt this Period: 250.00

Campaign Donation

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

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

638.77

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

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

FOR LINE NUMBER: PAGE 10 OF 68  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

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

Mailing Address 901 Oak St

City State Zip Code  
Chattanooga TN 37403

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

Name of Employer Occupation  
UTC Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
305.00

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

**Transaction ID : SA11AI.4865**

Amount of Each Receipt this Period  
 Campaign Donation 55.00

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

Mailing Address 1963 Tremin Rd

City State Zip Code  
La Habra Heights CA 90631

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.4883**

Amount of Each Receipt this Period  
 Campaign Donation 1500.00

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

Mailing Address 200 Manufacturers Rd, Apt 515

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 24 2014

**Transaction ID : SA11AI.4889**

Amount of Each Receipt this Period  
 Campaign Donation 300.00

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

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

1855.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 200 Manufacturers Rd, Apt 515

City: Chattanooga State: TN Zip Code: 37405

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

Name of Employer: Self-Employed Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 700.00

Date of Receipt: 08 / 25 / 2014

**Transaction ID : SA11AI.4890**

Amount of Each Receipt this Period: 200.00

Campaign Donation

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

Mailing Address 200 Manufacturers Rd, Apt 515

City: Chattanooga State: TN Zip Code: 37405

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

Name of Employer: Self-Employed Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 21 / 2014

**Transaction ID : SA11AI.4891**

Amount of Each Receipt this Period: 300.00

Campaign Donation

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

Mailing Address 4909 N Moore Ln

City: Chattanooga State: TN Zip Code: 37411

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

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 10 / 2014

**Transaction ID : SA11AI.4894**

Amount of Each Receipt this Period: 100.00

Campaign Donation

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**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: 2002.43

Date of Receipt: 08 / 01 / 2014

**Transaction ID : SA11AI.4895**

Amount of Each Receipt this Period: 0.00

In-kind - Political Strategy and Advisory Consultation Fee Advance  
**[MEMO ITEM]**

**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: 2002.43

Date of Receipt: 08 / 14 / 2014

**Transaction ID : SA11AI.4900**

Amount of Each Receipt this Period: 0.00

In-kind - USCellular Wifi Internet for 631  
**[MEMO ITEM]**

**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: 2002.43

Date of Receipt: 08 / 27 / 2014

**Transaction ID : SA11AI.4898**

Amount of Each Receipt this Period: 0.00

In-kind - Megabus Travel  
**[MEMO ITEM]**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**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: 2002.43

Date of Receipt: 08 / 27 / 2014

**Transaction ID : SA11AI.4899**

Amount of Each Receipt this Period: 0.00

In-kind - Sonic 10K Prints Order #38162 was advance by candidate  
**[MEMO ITEM]**

**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: 2002.43

Date of Receipt: 08 / 28 / 2014

**Transaction ID : SA11AI.4901**

Amount of Each Receipt this Period: 0.00

In-kind - Office Depot: Print Paper was advance by candidate  
**[MEMO ITEM]**

**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: 2002.43

Date of Receipt: 09 / 01 / 2014

**Transaction ID : SA11AI.4913**

Amount of Each Receipt this Period: 0.00

In-kind - Cellular World: Cell Phone Cable-was advance by candidate  
**[MEMO ITEM]**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**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: **2002.43**

Date of Receipt: **09 / 03 / 2014**

**Transaction ID : SA11AI.4905**

Amount of Each Receipt this Period: **0.00**

In-kind - Maynardville USPS: Stamps-was advance by candidate  
**[MEMO ITEM]**

**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: **2002.43**

Date of Receipt: **09 / 05 / 2014**

**Transaction ID : SA11AI.4902**

Amount of Each Receipt this Period: **0.00**

In-kind - Discount Mugs: 100 T-Shirts-to advance by candidate  
**[MEMO ITEM]**

**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: **2002.43**

Date of Receipt: **09 / 05 / 2014**

**Transaction ID : SA11AI.4903**

Amount of Each Receipt this Period: **0.00**

In-kind - Banners on the Cheap Two 2'x5' Vinyl Banners-to advance by candidate  
**[MEMO ITEM]**

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

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

**0.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**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: **2002.43**

Date of Receipt: 09 / 05 / 2014

**Transaction ID : SA11AI.4904**

Amount of Each Receipt this Period: 0.00

In-kind - Zoo Printing: 5K Mailable Postcards-to advance by candidate  
**[MEMO ITEM]**

**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: **2002.43**

Date of Receipt: 09 / 05 / 2014

**Transaction ID : SA11AI.4909**

Amount of Each Receipt this Period: 0.00

In-kind - Zoo Printing: Bumper Stickers-to advance by candidate  
**[MEMO ITEM]**

**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: **2002.43**

Date of Receipt: 09 / 09 / 2014

**Transaction ID : SA11AI.4914**

Amount of Each Receipt this Period: 0.00

In-kind - Discount Mugs: 100 T-Shirts-to advance by candidate  
**[MEMO ITEM]**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 10 / 2014	
Mailing Address P.O. BOX 218		<b>Transaction ID : SA11AI.4915</b>	
City Maynardville	State TN	Zip Code 37807-0218	
FEC ID number of contributing federal political committee. C H2TN03144		Amount of Each Receipt this Period 4.91	
Name of Employer None	Occupation Not Employed	In-kind - Maynardville USPS: Certified Mail <b>[MEMO ITEM]</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2002.43		

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 14 / 2014	
Mailing Address P.O. BOX 218		<b>Transaction ID : SA11AI.4912</b>	
City Maynardville	State TN	Zip Code 37807-0218	
FEC ID number of contributing federal political committee. C H2TN03144		Amount of Each Receipt this Period 0.00	
Name of Employer None	Occupation Not Employed	In-kind - USCellular: WiFi Internet for 631 & Travel-to advance by candidate <b>[MEMO ITEM]</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2002.43		

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2014	
Mailing Address P.O. BOX 218		<b>Transaction ID : SA11AI.4917</b>	
City Maynardville	State TN	Zip Code 37807-0218	
FEC ID number of contributing federal political committee. C H2TN03144		Amount of Each Receipt this Period 6.12	
Name of Employer None	Occupation Not Employed	In-kind - Maynardville USPS: 306 2-cent Stamps <b>[MEMO ITEM]</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2002.43		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**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: **2002.43**

Date of Receipt: 09 / 16 / 2014

**Transaction ID : SA11AI.4910**

Amount of Each Receipt this Period: 0.00

In-kind - NGP VAN Robocalls-to advance by candidate

**[MEMO ITEM]**

**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: **2002.43**

Date of Receipt: 09 / 19 / 2014

**Transaction ID : SA11AI.4916**

Amount of Each Receipt this Period: 13.33

In-kind - Maynardville USPS: Certified Mail

**[MEMO ITEM]**

**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: **2002.43**

Date of Receipt: 09 / 20 / 2014

**Transaction ID : SA11AI.4908**

Amount of Each Receipt this Period: 43.68

In-kind - Best Buy: Tripod

**[MEMO ITEM]**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**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: 2002.43

Date of Receipt: 09 / 28 / 2014

**Transaction ID : SA11AI.4906**

Amount of Each Receipt this Period: 0.00

In-kind - NGP VAN: Robocalls-to advance by candidate

**[MEMO ITEM]**

**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: 4652.43

Date of Receipt: 09 / 30 / 2014

**Transaction ID : SA11AI.4907**

Amount of Each Receipt this Period: 0.00

In-kind - Zoo Printing: Mailer Print-for advance by candidate

**[MEMO ITEM]**

**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: 4652.43

Date of Receipt: 09 / 30 / 2014

**Transaction ID : SA11AI.4919**

Amount of Each Receipt this Period: 2650.00

In-kind - Mileage of 10194 @ 26 cents per mile

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

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

2650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 31 Mountain Orchard Path

City Signal Mountain State TN Zip Code 37377

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

Name of Employer Erlanger Medical Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : SA11AI.4943**

Amount of Each Receipt this Period  
 100.00

Campaign Donation

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

Mailing Address 31 Mountain Orchard Path

City Signal Mountain State TN Zip Code 37377

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

Name of Employer Erlanger Medical Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : SA11AI.4944**

Amount of Each Receipt this Period  
 100.00

Campaign Donation

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

Mailing Address 14 N. Lynncrest Dr

City Chattanooga State TN Zip Code 37411

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

Name of Employer Requested Information Occupation Requested Information

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

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

**Transaction ID : SA11AI.4952**

Amount of Each Receipt this Period  
 450.00

Campaign Donation

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

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

Mailing Address 280 Hackworth

City Clinton State TN Zip Code 37716

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2080.00

Date of Receipt  
08 / 01 / 2014

**Transaction ID : SA11AI.5743**

Amount of Each Receipt this Period  
520.00

In-kind - Web server and web page for August

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

Mailing Address 280 Hackworth

City Clinton State TN Zip Code 37716

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2080.00

Date of Receipt  
08 / 18 / 2014

**Transaction ID : SA11AI.5003**

Amount of Each Receipt this Period  
810.00

In-kind - Discount Mugs: T-Shirts Advance

**[MEMO ITEM]**

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

Mailing Address 280 Hackworth

City Clinton State TN Zip Code 37716

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3120.00

Date of Receipt  
09 / 30 / 2014

**Transaction ID : SA11AI.5004**

Amount of Each Receipt this Period  
1040.00

In-kind - Web Services Provided for September, October (i.e. Webpage. Email. araphics)

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

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

1560.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 1048 Lower Brow Rd

City State Zip Code  
Signal Mountaing TN 37377

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.4976**

Amount of Each Receipt this Period  
1000.00

Campaign Donation

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

Mailing Address 1048 Lower Brow Rd

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.4978**

Amount of Each Receipt this Period  
1000.00

Campaign Donation

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

Mailing Address 441 Pine Bluff Dr

City State Zip Code  
East Ridge TN 37412

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

Name of Employer Occupation  
University of TN at Chattanooga Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.4986**

Amount of Each Receipt this Period  
500.00

Campaign Donation

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

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

Mailing Address 100 Scenic Hwy #18

City Lookout Mountain State TN Zip Code 37350

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.4995**

Amount of Each Receipt this Period  
2100.00

Campaign Donation

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

Mailing Address 100 Scenic Hwy #18

City Lookout Mountain State TN Zip Code 37350

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3100.00

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

**Transaction ID : SA11AI.4996**

Amount of Each Receipt this Period  
500.00

Campaign Donation

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

Mailing Address 319 Park Rd

City Lookout Mountain State TN Zip Code 37350

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

Name of Employer Volunteer Behavior Health Occupation Center Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.4999**

Amount of Each Receipt this Period  
250.00

Campaign Donation

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address P.O. BOX

City State Zip Code  
Chattanooga TN 37401

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

Name of Employer Occupation  
Self-Employed Sculptor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.4723**

Amount of Each Receipt this Period  
1000.00

Campaign Donation

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

Mailing Address 134 Oliver Dr

City State Zip Code  
Madisonville TN 37354

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  
325.00

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

**Transaction ID : SA11AI.5062**

Amount of Each Receipt this Period  
25.00

Campaign Donation

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

Mailing Address 19 Patten Pkwy

City State Zip Code  
Chattanooga TN 37402-2211

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.5067**

Amount of Each Receipt this Period  
250.00

Campaign Donation

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

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

1275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 130 Oklahoma Ave

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.5068**

Amount of Each Receipt this Period  
2000.00

Campaign Donation

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

Mailing Address 130 Oklahoma

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

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

**Transaction ID : SA11AI.5070**

Amount of Each Receipt this Period  
2000.00

Campaign Donation

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

Mailing Address 519 Terrell St

City State Zip Code  
Chattanooga TN 37411

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

Name of Employer Occupation  
Requested Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.5071**

Amount of Each Receipt this Period  
200.00

Campaign Donation

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

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

4200.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 116 Claymore Ln

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
None Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.5080**

Amount of Each Receipt this Period  
500.00

Campaign Donation

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

Mailing Address 99 Walnut St, #402

City State Zip Code  
Chattanooga TN 37403

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.5110**

Amount of Each Receipt this Period  
500.00

Campaign Donation

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

Mailing Address 1775 Delano Rd

City State Zip Code  
Delano TN 37325

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.5112**

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 26 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 104 Capital Cir

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**309.00**

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

**Transaction ID : SA11AI.5122**

Amount of Each Receipt this Period  
**109.00**

Campaign Donation

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

Mailing Address 304 Creekshire Dr

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  
 08 / 10 / 2014

**Transaction ID : SA11AI.5135**

Amount of Each Receipt this Period  
**250.00**

Campaign Donation

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

Mailing Address 304 Creekshire Dr

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  
**2250.00**

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

**Transaction ID : SA11AI.5133**

Amount of Each Receipt this Period  
**2000.00**

Campaign Donation

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

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

**2359.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 68
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**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  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2014

**Transaction ID : SA11A1.5138**

Amount of Each Receipt this Period  
250.00

Campaign Donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / 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).....

250.00

25258.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 68
	<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	

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

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

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

Mailing Address 9 S. Kilgore St

City Athens State TN Zip Code 37303

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 23 / 2014

**Transaction ID : SA11B.5025**

Amount of Each Receipt this Period  
 Campaign Donation  
 1000.00

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

Mailing Address 9 S. Kilgore St

City Athens State TN Zip Code 37303

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11B.5027**

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

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

Mailing Address 9 S. Kilgore St

City Athens State TN Zip Code 37303

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 10 / 2014

**Transaction ID : SA11B.5028**

Amount of Each Receipt this Period  
 Campaign Donation  
 500.00

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

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

1647.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 68
<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	

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. Terrace Meadows**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1103 Wetwood Ave

City Chattanooga	State TN	Zip Code 37405
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  

M M / D D / Y Y Y Y
08 / 29 / 2014

**Transaction ID : SA11B.5030**

Amount of Each Receipt this Period  

25.00
-------

Campaign Donation

**B. Patsy Meredith**  
Full Name (Last, First, Middle Initial)  
Mailing Address 102 Waterson Way

City Clinton	State TN	Zip Code 37716
-----------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  

M M / D D / Y Y Y Y
09 / 28 / 2014

**Transaction ID : SA11B.5032**

Amount of Each Receipt this Period  

100.00
--------

Campaign Donation

**C. Ben Meyer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8802 Oak Valley Ln

City Chattanooga	State TN	Zip Code 37421
---------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
25.00

Date of Receipt  

M M / D D / Y Y Y Y
09 / 07 / 2014

**Transaction ID : SA11B.5033**

Amount of Each Receipt this Period  

25.00
-------

Campaign Donation

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

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

150.00
--------

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 68
<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	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**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  
100.00

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

**Transaction ID : SA11B.5035**

Amount of Each Receipt this Period  
100.00

Campaign Donation

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

Mailing Address 29 S Crest Rd

City State Zip Code  
Chattanooga TN 37404

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

Name of Employer Occupation  
Self-Employed Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11B.5037**

Amount of Each Receipt this Period  
2600.00

Campaign Donation

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

Mailing Address 3076 Rivermont Rd

City State Zip Code  
Chattanooga TN 37415

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

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

**Transaction ID : SA11B.5039**

Amount of Each Receipt this Period  
2600.00

Campaign Donation

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 68
	<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	

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**

Full Name (Last, First, Middle Initial) <b>A. Angela Minor</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 1411 Star St		<b>Transaction ID : SA11B.5040</b>
City Cleveland	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Self-Employed	Occupation Graphic Artist	Campaign Donation
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20.00	

Full Name (Last, First, Middle Initial) <b>B. Cannon Montague</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 503 E Brow Rd		<b>Transaction ID : SA11B.5042</b>
City Lookout Mountain	State TN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation Retired	Campaign Donation
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<b>TOTAL</b> This Period (last page this line number only).....	7217.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 32 OF 68	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/>	<input type="checkbox"/> 15

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

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

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

Mailing Address 328 Okama Way

City Loudon State TN Zip Code 37774

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
07		28		2014

**Transaction ID : SA11C.4989**

Amount of Each Receipt this Period  
400.00

Campaign Donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  

M M	/	D D	/	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

Amount of Each Receipt this Period

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

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

400.00
400.00



**SCHEDULE 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 33 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

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

Full Name (Last, First, Middle Initial) <b>B. ACTBLUE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 441146		Amount of Each Disbursement this Period 346.45 <b>Transaction ID : SB17.5152</b>
City SOMERVILLE	State MA	
Purpose of Disbursement Online Collection Fees From 7/19/2014 to 9/30/2014 (Withdrawn Before Transfer)		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1778.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3556.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

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

Full Name (Last, First, Middle Initial) <b>B. C&amp;D Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 5351 Tennyson St, Unit 1C		Amount of Each Disbursement this Period 23.80
City Denver	State CO	
Zip Code 80212	Purpose of Disbursement 1000 Bumper Sticker Shipping invoice#038227CORR	<b>Transaction ID : SB17.5149</b>
Candidate Name <b>Headrick for Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	682.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

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

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

Full Name (Last, First, Middle Initial) <b>c. Pat Combs</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 65.28
City Chattanooga	State TN	
Zip Code 37405	Purpose of Disbursement Repayment: Pizza Hut Catering for Phone Banking Event	Transaction ID : SB17.5187
Candidate Name <b>Headrick for Congress</b>	Category/Type 009	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	165.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Pat Combs</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 270.38
City Chattanooga	State TN	
Zip Code 37405	Purpose of Disbursement In-kind - Facebook Boosting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pat Combs</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 502 Lullwater Rd		Amount of Each Disbursement this Period 388.77
City Chattanooga	State TN	
Zip Code 37405	Purpose of Disbursement In-kind - Mileage of 1495 miles at 26 center per mile	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	659.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

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

Full Name (Last, First, Middle Initial) <b>B. Discount Mugs</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 12619 NW 115th Ave, Bldg #200		Amount of Each Disbursement this Period 660.00 <b>Transaction ID : SB17.5775</b>
City Medley	State FL	
Zip Code 33178	Purpose of Disbursement tee shirts with logo	Category/ Type 006
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

Full Name (Last, First, Middle Initial) <b>c. Discount Mugs</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 12619 NW 115th Ave, Bldg #200		Amount of Each Disbursement this Period 412.00 <b>Transaction ID : SB17.5779</b>
City Medley	State FL	
Zip Code 33178	Purpose of Disbursement tee shirts with name, logo	Category/ Type 006
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5591.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

Full Name (Last, First, Middle Initial) <b>A. EPBFI</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address P.O. BOX 182251		Amount of Each Disbursement this Period 254.52 <b>Transaction ID : SB17.5159</b>
City Chattanooga	State TN	
Zip Code 37422	Purpose of Disbursement Quarter Fees for EPBFI Phone	Category/ Type 003
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 5.97 <b>Transaction ID : SB17.5265</b>
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement Duplicate Keys for River Hills Manor	Category/ Type 001
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 287.07 <b>Transaction ID : SB17.5267</b>
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement Office Depot: Office & Print Supplies	Category/ Type 001
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	547.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 275.55 <b>Transaction ID : SB17.5268</b>
City Maynardville	State TN	
Purpose of Disbursement Office Depot: Toner Cartridges & Print Supplies		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 93.11 <b>Transaction ID : SB17.5271</b>
City Maynardville	State TN	
Purpose of Disbursement LAN Phones (992-7168, 0631) 2 mo+install		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.4896</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Political Strategy and Advisory Consultation Fee Advance		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	275.55
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

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

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

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 42.62 <b>Transaction ID : SB17.5269</b>
City Maynardville	State TN	
Purpose of Disbursement Tennessean: Newspapers form 8/1-8/31		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	42.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 67.20 <b>Transaction ID : SB17.5276</b>
City Maynardville	State TN	
Purpose of Disbursement VAN Robocalls: Predictive Dial Trial		Category/ Type 005
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.4939</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - USCellular Wifi Internet for 631		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5205</b>
City Maynardville	State TN	
Purpose of Disbursement Repayment: USCellular: WiFi Internet for 631 & Travel		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	67.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 12.32 <b>Transaction ID : SB17.5270</b>
City Maynardville	State TN	
Purpose of Disbursement BiLo: Drinks Phone Bank		Category/ Type 007
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 1.25 <b>Transaction ID : SB17.5282</b>
City Maynardville	State TN	
Purpose of Disbursement Convention Center Parking		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 16.55 <b>Transaction ID : SB17.5284</b>
City Maynardville	State TN	
Purpose of Disbursement Food City (Cups, Napkins, Plates)		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.5277</b>
City Maynardville	State TN	
Purpose of Disbursement CWLI Dues (6 Months) Chattanooga's Women's Leadership Institute		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 124.73 <b>Transaction ID : SB17.5278</b>
City Maynardville	State TN	
Purpose of Disbursement Big Lots: Meeting, Office Supplies		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	174.73
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

Full Name (Last, First, Middle Initial) <b>A. Battleground Solutions</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address 703 E Long St Unit #4		Amount of Each Disbursement this Period 0.00
City Columbus	State OH Zip Code 43203	
Purpose of Disbursement Final Fee: Political Strategy and Advisory Consultation Fee		Transaction ID : SB17.5224.0
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TN District: 03	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN Zip Code 37807-0218	
Purpose of Disbursement payment Battleground employ bus fee, strategy fundraising consulting visit		Transaction ID : SB17.5225
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TN District: 03	Category/Type 008	

Full Name (Last, First, Middle Initial) <b>c. Battleground Solutions</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address 703 E Long St Unit #4		Amount of Each Disbursement this Period 0.00
City Columbus	State OH Zip Code 43203	
Purpose of Disbursement Repayment: Bus transportation expense Consultant visit for training in fundraising		Transaction ID : SB17.5225.0
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: TN District: 03	Category/Type 007	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5216</b>
City Maynardville	State TN	
Purpose of Disbursement NGP VAN Robocalls-redesignated		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.4940</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Sonic 10K Prints Order #38162 was advance by candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.4941</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Megabus Travel		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 18.25 <b>Transaction ID : SB17.5203</b>
City Maynardville	State TN	
Purpose of Disbursement balance to battleground for megabus		Category/ Type 002
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5204</b>
City Maynardville	State TN	
Purpose of Disbursement Sonic 5000x2 Print Order#38162-redesignated		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Sonic</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 5018 Tampa West Blvd		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5204.0</b> <b>[MEMO ITEM]</b>
City Tampa	State FL	
Purpose of Disbursement Repayment: Sonic: 5000x2Print Order# 38162		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	18.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - Office Depot: Print Paper was advance by candidate	Category/ Type
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement Office Depot: Print Paper-redesgnted	Category/ Type 001
Candidate Name <b>Headrick for Congress</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement River Hills Manor Rent August-redesignated to committee	Category/ Type 001
Candidate Name <b>Headrick for Congress</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 20.42 <b>Transaction ID : SB17.5283</b>
City Maynardville	State TN	
Purpose of Disbursement UT Bookstore (Two Reich Books)		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.4926</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Cellular World: Cell Phone Cable-was advance by candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5218</b>
City Maynardville	State TN	
Purpose of Disbursement Cellular World: Cell Phone Cable-redesignated to committee		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Purpose of Disbursement In-kind - Maynardville USPS: Stamps-was advance by candidate		
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>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Purpose of Disbursement Maynardville USPS: Stamps-redesgnated		
Candidate Name <b>Headrick for Congress</b>		Category/ Type 001
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Purpose of Disbursement In-kind - Zoo Printing: Bumper Stickers-to advance by candidate		
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	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - Zoo Printing: 5K Mailable Postcards-to advance by candidate	Transaction ID : SB17.4935
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)	[MEMO ITEM]
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - Banners on the Cheap Two 2'x5' Vinyl Banners-to advance by candidate	Transaction ID : SB17.4936
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)	[MEMO ITEM]
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - Discount Mugs: 100 T-Shirts-to advance by candidate	Transaction ID : SB17.4937
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)	[MEMO ITEM]
State: TN District: 03		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5207</b>
City Maynardville	State TN	
Purpose of Disbursement Discount Mugs: 100 T-Shirts-redesgnated		Category/ Type 006
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Discount Mugs</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 12619 NW 115th Ave, Bldg #200		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5207.0</b>
City Medley	State FL	
Purpose of Disbursement Repayment: 100 T-Shirts		Category/ Type 006
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5208</b>
City Maynardville	State TN	
Purpose of Disbursement Banners on the Cheap: Two 2'x5' Vinyl Banners-redesgnated		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5209</b>
City Maynardville	State TN	
Purpose of Disbursement Zoo Printing: 5000 Mailable Postcards-redesignated		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5214</b>
City Maynardville	State TN	
Purpose of Disbursement Zoo Printing: Bumper Stickers-redesignated		Category/ Type 006
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.4925</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Discount Mugs: 100 T-Shirts-to advance by candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5219</b>
City Maynardville	State TN	
Purpose of Disbursement Discount Mugs: 100 T-Shirts-redesignated		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Discount Mugs</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2014
Mailing Address 12619 NW 115th Ave, Bldg #200		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5219.0</b>
City Medley	State FL	
Purpose of Disbursement 100 T-Shirts		Category/ Type 006
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 4.91 <b>Transaction ID : SB17.4924</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Maynardville USPS: Certified Mail		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

**[MEMO ITEM]**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 4.91 <b>Transaction ID : SB17.5220</b>
City Maynardville	State TN	
Purpose of Disbursement Repayment: Maynardville USPS: Certified Mail		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 12 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 16.22 <b>Transaction ID : SB17.5280</b>
City Maynardville	State TN	
Purpose of Disbursement Knoxville Utilities Board (KUB) 631 HQ Use		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.4927</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - USCellular: WiFi Internet for 631 & Travel-to advance by candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 6.00 <b>Transaction ID : SB17.5217</b>
City Maynardville	State TN	
Purpose of Disbursement USCellular: WiFi Internet for 631 & Travel-redesgnated		Category/ Type 003
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 6.12 <b>Transaction ID : SB17.4922</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Maynardville USPS: 306 2-cent Stamps		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 6.12 <b>Transaction ID : SB17.5222</b>
City Maynardville	State TN	
Purpose of Disbursement Repayment: Maynardville USPS: 306 2-Cent Stamps		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6.12
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - NGP VAN Robocalls-to advance by candidate	[MEMO ITEM]
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>B. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement NGP VAN Robocalls-redesignated	
Candidate Name <b>Headrick for Congress</b>	Category/Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 13.33
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - Maynardville USPS: Certified Mail	
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		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 13.33 <b>Transaction ID : SB17.5221</b>
City Maynardville	State TN	
Purpose of Disbursement Repayment: Maynardville USPS: Certified Mail		Category/ Type 001
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 43.68 <b>Transaction ID : SB17.4931</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - Best Buy: Tripod		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 43.68 <b>Transaction ID : SB17.5213</b>
City Maynardville	State TN	
Purpose of Disbursement Repayment: Best Buy: Tripod		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	57.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 68			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 20 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 191.63 <b>Transaction ID : SB17.5281</b>
City Maynardville	State TN	
Purpose of Disbursement Costco: YouTube Camcorder		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 28 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.4933</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Purpose of Disbursement In-kind - NGP VAN: Robocalls-to advance by candidate		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>c. Dr. Mary M Headrick</b>		Date of Disbursement MM / DD / YYYY 09 / 28 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5211</b>
City Maynardville	State TN	
Purpose of Disbursement NGP VAN Robocalls		Category/ Type 004
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	191.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 2650.00 <b>Transaction ID : SB17.4920</b>
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - Mileage of 10194 @ 26 cents per mile	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

Full Name (Last, First, Middle Initial) <b>B. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.4932</b> <b>[MEMO ITEM]</b>
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement In-kind - Zoo Printing: Mailer Print-for advance by candidate	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

Full Name (Last, First, Middle Initial) <b>C. Dr. Mary M Headrick</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 218		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : SB17.5212</b>
City Maynardville	State TN	
Zip Code 37807-0218	Purpose of Disbursement Zoo Printing: Mailer Print-redesignated	Category/ Type 004
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TN District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Zoo Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 5700 Bandini Blvd		Amount of Each Disbursement this Period 0.00
City Commerce	State CA	
Zip Code 90040	Purpose of Disbursement Mailer Printing	Transaction ID : SB17.5212.0
Candidate Name <b>Headrick for Congress</b>	Category/ Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Ralph Hubbard</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 280 Hackworth		Amount of Each Disbursement this Period 520.00
City Clinton	State TN	
Zip Code 37716	Purpose of Disbursement In-kind - Web server and web page for August	Transaction ID : SB17.5744
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ralph Hubbard</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 280 Hackworth		Amount of Each Disbursement this Period 810.00
City Clinton	State TN	
Zip Code 37716	Purpose of Disbursement In-kind - Discount Mugs: T-Shirts Advance	Transaction ID : SB17.5007
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	520.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 68	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Ralph Hubbard</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 280 Hackworth		Amount of Each Disbursement this Period 810.00 <b>Transaction ID : SB17.5184</b>
City Clinton	State TN	
Zip Code 37716	Purpose of Disbursement Discount Mugs: 100 T-Shirts Advance Repayment	Category/ Type 009
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Discount Mugs</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 12619 NW 115th Ave, Bldg #200		Amount of Each Disbursement this Period 810.00 <b>Transaction ID : SB17.5184.0</b>
City Medley	State FL	
Zip Code 33178	Purpose of Disbursement 100 T-Shirts	Category/ Type 006
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Ralph Hubbard</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address 280 Hackworth		Amount of Each Disbursement this Period 1040.00 <b>Transaction ID : SB17.5006</b>
City Clinton	State TN	
Zip Code 37716	Purpose of Disbursement In-kind - Web Services Provided for September, October (i.e. Webpage, Email, graphics)	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1850.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 68
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Markco Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1609 Hamill Rd		Amount of Each Disbursement this Period 349.60 <b>Transaction ID : SB17.5166</b>
City Hixson State TN Zip Code 37343	Purpose of Disbursement Large Signs (10 4'x4' signs) Category/Type 003	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: TN District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. PCSigns</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2534 Commerce Blvd		Amount of Each Disbursement this Period 1398.21 <b>Transaction ID : SB17.5156</b>
City Cincinnati State OH Zip Code 45241	Purpose of Disbursement Yard Signs Category/Type 003	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: TN District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. PCSigns</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 2534 Commerce Blvd		Amount of Each Disbursement this Period 433.63 <b>Transaction ID : SB17.5158</b>
City Cincinnati State OH Zip Code 45241	Purpose of Disbursement Yard Signs Category/Type 003	
Candidate Name Headrick for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: TN District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2181.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. PCSigns</b>		M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address 2534 Commerce Blvd		Amount of Each Disbursement this Period	
City Cincinnati	State OH	Zip Code 45241	1751.31
Purpose of Disbursement 1000 Yard Signs		Category/Type 004	<b>Transaction ID : SB17.5172</b>
Candidate Name <b>Headrick for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014		
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)		
State: TN	District: 03		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. River Hills Manor</b>		M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 2627 Hixson Pike		Amount of Each Disbursement this Period	
City Chattanooga	State TN	Zip Code 37415	607.00
Purpose of Disbursement Apt 217 campaign headquarters rent		Category/Type 001	<b>Transaction ID : SB17.5758</b>
Candidate Name <b>Headrick for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014		
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)		
State: TN	District: 03		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>c. Sonic</b>		M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 5018 Tampa West Blvd		Amount of Each Disbursement this Period	
City Tampa	State FL	Zip Code 33634	455.00
Purpose of Disbursement 10K Cards Printed		Category/Type 003	<b>Transaction ID : SB17.5150</b>
Candidate Name <b>Headrick for Congress</b>			
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014		
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)		
State: TN	District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2813.31
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. Sonic</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2014
Mailing Address 5018 Tampa West Blvd		Amount of Each Disbursement this Period 305.63 <b>Transaction ID : SB17.5771</b>
City Tampa State FL Zip Code 33634	Purpose of Disbursement postcard printing 004 Category/Type	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

Full Name (Last, First, Middle Initial) <b>B. Sonic</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 5018 Tampa West Blvd		Amount of Each Disbursement this Period 203.09 <b>Transaction ID : SB17.5163</b>
City Tampa State FL Zip Code 33634	Purpose of Disbursement 5000 Post Cards, Order #38243 003 Category/Type	
Candidate Name <b>Headrick for Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: TN District: 03		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	814.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 3009 Maynardville Hwy		Amount of Each Disbursement this Period 98.00 <b>Transaction ID : SB17.5774</b>
City Maynardville	State TN	
Purpose of Disbursement postage stamps	Category/ Type 004	
Candidate Name <b>Headrick for Congress</b>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TN District: 03	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4770.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 68			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

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

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

Full Name (Last, First, Middle Initial) <b>c. Zoo Printing</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 5700 Bandini Blvd		Amount of Each Disbursement this Period 432.93 <b>Transaction ID : SB17.5778</b>
City Commerce	State CA	
Purpose of Disbursement card printing with logo, contact, theme		Category/ Type 006
Candidate Name <b>Headrick for Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3930.93
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 68		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

**A. Zoo Printing**

Full Name (Last, First, Middle Initial)  
Mailing Address 5700 Bandini Blvd

City Commerce State CA Zip Code 90040

Purpose of Disbursement card printing

Candidate Name **Headrick for Congress**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: TN District: 03

Date of Disbursement: 09 / 30 / 2014

Amount of Each Disbursement this Period: 1465.43

Transaction ID : SB17.5783

Category/Type: 006

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 1465.43

**TOTAL** This Period (last page this line number only) ..... 34881.67