707 Georgia Avenue, Suite 401
Chattanooga, Tennessee 37402
Telephone: (423) 266-5400
Facsimile: (423) 265-8055

Law Offices Of

JOHN M. WOLFE, JR.
AMELIA C. ROBERTS

Fax

To: Federal Election C. From: John Wolfe

Fax: 1-202-219-0174 Pages:

Phone: 1-800-424-9530 Date: 11/07/2006

Re: FEC Form 9 CC:

☐ Urgent ☐ For Review ☒ Please Comment ☐ Please Reply ☐ Please Recycle

• Comments:

here is:

(1) The breakdow on expenditures for the 60 second commercials on WGOW 102.3 FM and its affiliates. It gives the timeline as to when the charges were incurred;

(2) My original note and report sent 11/01/06; I reiterate my request for an FEC ID #.

(3) Expenditures will not exceed twenty thousand dollars.

JW 11/07-2006

News/Talk
NETWORK
Citadel Broadcasting Company

October 31, 2006

Commercial totals for John Wolfe Jr

'06 August Primary Election:

WGOW AM/FM	7/29-8/3	$1240

'06 November General Election:

WGOW AM/FM	9/25-10/31	$6675
WOGT FM(Duke)	10/25-11/1	$1200
WSKZ FM(KZ 106)	11/4-11/5	$750
WGOW AM/FM	11/1-11/6	$1500
	Total expenditure	$11,365

2603927 0822

NEWS RADIO
WGOW
1150 AM

WGOW AM/FM
P.O. Box 11202 Chattanooga, TN 37401
Phone 423-756-6141 FAX 423-756-0981

TALK! RADIO 102.3 FM

707 Georgia Avenue, Suite 401
Chattanooga, Tennessee 37402
Telephone: (423) 266-8400
Facsimile: (423) 265-0055

Law Offices Of

JOHN M. WOLFE, JR.
AMELIA C. ROBERTS

Fax

To: Federal Election C. From: John Wolfe

Fax: 1-202-219-0174 Pages:

Phone: 1-800-424-9530 Date: 11/01/2006

Re: FEC FORM 9 CC:

☐ Urgent ☐ For Review ☒ Please Comment ☒ Please Reply ☐ Please Recycle

• Comments:

Please call me ABOUT
Getting AN FEC NUMBER
FOR IdENTIFICATION
PURPOSES, please.
1-423-877-4951 (home)
1-423-266-8400 (WORK)
1-423-505-5960 (CELL)

I will FAX bills from
RADIO STATION showing
time ads runned, AND
the price of each ad. I do
NOT KNOW IF the ads were titled,
but I'll find out.

JW 11/01/2006

26034627062 3

* * * Transmission Result Report(MemoryTX) (Nov. 1. 2006 5:06PM) * * *

1) John Wolfe Jr. Atty.
2)

Date/Time: Nov. 1. 2006 5:05PM

File No.	Mode	Destination	Pg(s)	Result	Page Not Sent
9344	Memory TX	12022190174	P. 5	OK	

Reason for error
E.1) Hang up or line fail
E.2) Busy
E.3) No answer
E.4) No facsimile connection

Law Offices Of
JOHN D. WOLFE, JR.
ANGELO C. MORSETTO

Fax

To: Federal Election Co. From: John Wolfe
Fax: 1-202-219-0174 Pages:
Phone: 1-800-424-1530 Date: 11/01/2006
Re: FEC FORM 9 CC:

☐ Urgent ☐ For Review ☐ Please Comment ☒ Please Reply ☐ Please Recycle

* Comments:

please call me about
getting an FEC number.
for identification
purposes, please.
1-423-877-4951 (home)
1-423-246-8400 (work)
1-423-505-5960 (cell)

I will fax bills from
radio station showing
time aif running, and
the price of each ad. I do
not know if the ads were broken
but I'll find out.

JW 11/01/2006

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name: John Wolfe

(b) Address (number and street) ☐ check if different than previously reported: 3815 FORREST highlANDS DRIVE

(c) City, State and ZIP Code: Chattanooga, Tennessee 37415

2. FEC Identification Number: C

(d) Name of Employer or Principal Place of Business: Self

(e) Occupation: Attorney

3. Is This Statement X New or Amended

4. Covering Period 07 01 2006 through 11 01 2006

5. (a) Date of Public Distribution(s) 07 01 2006 **(b) Communication Title** No titles

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10? Yes No X

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account? Yes No X

8. Custodian of Records

(a) Name: John Wolfe

(b) Address (number and street): 3815 FORREST highlANDS drive

(c) City, State and ZIP Code: Chattanooga, Tennessee, 37415

(d) Name of Employer or Principal Place of Business: Self

(e) Occupation: Attorney

9. Total Donations This Statement 10,315.00

10. Total Disbursements/Obligations This Statement 10,315.00

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM: John Wolfe

SIGNATURE: John Wolfe DATE: 11/01/2006

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

FESAN036.PDF FEC FORM 9 (REV. 02/2005)

SCHEDULE 9-B
Disbursement(s) Made or Obligation(s)

PAGE OF

A. Full Name (Last, First, Middle Initial) of Payee: WGOW RADIO
Mailing Address of Payee: 1175 Pineville Rd
City: Chattanooga, State: TN, Zip Code: 37405
Name of Employer: Citadel Communications – Broadcast, Occupation:
Purpose of Disbursement (including title(s) of communication(s)): 60 Second Commercials – No titles
Date of Disbursement or Obligation: 07 / / 2006
Amount: 1,240.00
Communication Date: 07 / / 2006

Name of Federal Candidate: Bob Corker
Office Sought: [ ] House [X] Senate [ ] President
State: TN District:
Disbursement/Obligation For: [X] Primary [ ] General [ ] Other (specify)

Name of Federal Candidate:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify)

Name of Federal Candidate:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify)

B. Full Name (Last, First, Middle Initial) of Payee: WGOW RADIO/DUKE FM 107.9
Mailing Address of Payee: 1175 Pineville Road
City: Chattanooga, State: TN, Zip Code: 37405
Name of Employer: Citadel Communications – Broadcast, Occupation:
Purpose of Disbursement (including title(s) of communication(s)): 60 Second Commercials – No titles
Date of Disbursement or Obligation: 09 / / 2006
Amount: 9,075.00
Communication Date: 09 / / 2006

Name of Federal Candidate: Bob Corker
Office Sought: [ ] House [X] Senate [ ] President
State: District:
Disbursement/Obligation For: [ ] Primary [X] General [ ] Other (specify)

Name of Federal Candidate:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify)

Name of Federal Candidate:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify)

SUBTOTAL of Disbursements/Obligations This Page (optional) ▶ 10,315.00

TOTAL This Period (last page this line number only) ▶ 10,315.00
(carry total from last page to Line 10)

FE3AN038.PDF

FEC FORM 9 (REV. 02/2005)

SCHEDULE 9-A
Donation(s) Received

PAGE OF

A. Full Name of Donor
Self, See Boxes 1 AND 8

Mailing Address of Donor

City State Zip

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

Amount
, , .

B. Full Name of Donor

Mailing Address of Donor

City State Zip

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

Amount
, , .

C. Full Name of Donor

Mailing Address of Donor

City State Zip

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

Amount
, , .

D. Full Name of Donor

Mailing Address of Donor

City State Zip

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

Amount
, , .

E. Full Name of Donor

Mailing Address of Donor

City State Zip

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

Amount
, , .

SUBTOTAL of Donations This Page (optional) ..... ▶ , , .

TOTAL This Period (last page this line number only) ..... ▶ , , .
(carry total from last page to Line 9)

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FEC FORM 9 (REV. 02/2003)

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

PAGE OF

11. Person(s) Sharing/Exercising Control

A. (a) Name Self only, see boxes 1 AND 8

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business (e) Occupation

B. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business (e) Occupation

C. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business (e) Occupation

D. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business (e) Occupation

E. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business (e) Occupation

26039270826

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

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☐ USPS First Class Mail	Postmarked
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☐ USPS Priority Mail	Postmarked Delivery Confirmation ™ Label ☐
☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
☐ Received from House Records & Registration Office	Date of Receipt
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☐ Received from Electronic Filing Office	Date of Receipt
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N/A PREPARER	N/A DATE PREPARED

(5/2004)

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