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**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Fraternal Order of Police Tennessee State Lodge PAC Fund

ADDRESS (number and street) P O Box 8

Check if different than previously reported. (ACC) Tipton TN 38071 - 0008

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 0383

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/>	Feb 20 (M2)	<input type="checkbox"/>	May 20 (M5)	<input type="checkbox"/>	Aug 20 (M8)	<input type="checkbox"/>	Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/>	Mar 20 (M3)	<input type="checkbox"/>	Jun 20 (M6)	<input type="checkbox"/>	Sep 20 (M9)	<input type="checkbox"/>	Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/>	Apr 20 (M4)	<input type="checkbox"/>	Jul 20 (M7)	<input type="checkbox"/>	Oct 20 (M10)	<input type="checkbox"/>	Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/>	Primary (12P)	<input type="checkbox"/>	General (12G)	<input type="checkbox"/>	Runoff (12R)
<input type="checkbox"/>	Convention (12C)	<input type="checkbox"/>	Special (12S)		

Election on 07/13/2009 in the State of TN

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

<input type="checkbox"/>	General (30G)	<input type="checkbox"/>	Runoff (30R)	<input type="checkbox"/>	Special (30S)
--------------------------	---------------	--------------------------	--------------	--------------------------	---------------

Election on 07/13/2009 in the State of TN

5. Covering Period 01/16/2009 through 06/30/2009

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 Larry McCoy

Signature of Treasurer Larry McCoy Date 07/13/2009

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 3X**  
Rev. 12/2004

29030122847

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Eraternal Order of Police Tennessee State Lodge PAC Fund

Report Covering the Period:

From:

01 16 2009

To:

06 30 2009

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2009	1772022	
(b) Cash on Hand at Beginning of Reporting Period.....	17,78522	
(c) Total Receipts (from Line 19).....	420333	426833
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2198855	2198855
7. Total Disbursements (from Line 31).....	1373492	1373492
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	825363	825363
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

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

**For further information contact:**

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

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

29030122848

**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Fraternal Order of Police Tennessee State Lodge PAC Fund**

Report Covering the Period: From: 01 16 2009 To: 06 30 2009

**I. Receipts**

**COLUMN A  
Total This Period**

**COLUMN B  
Calendar Year-to-Date**

11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....		
(ii) Unitemized.....	4,183.00	4,248.60
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4,183.00	4,248.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	4,183.00	4,248.00
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....	2033	2033
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4,203.33	4,268.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4,203.33	4,268.33

29030122849

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....	13,734.92	13,734.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	13,734.92	13,734.92
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))..... ▶		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	13,734.92	13,734.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... ▶	13,734.92	13,734.92

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	418300	424800
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	418300	424800
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1373492	1373492
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1373492	1373492

29030122851

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

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

FOR LINE NUMBER:  
(check only one)

PAGE OF 2

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

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

NAME OF COMMITTEE (In Full)  
**Fraternal Order of Police Tennessee State Lodge PAC Fund**

A. **Barker, B. H.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **121 Westwood Drive**  
 City: **Clinton** State: **TN** Zip Code: **37716**  
 Date of Disbursement: **05/05/2009**  
 Purpose of Disbursement: **Travel Expenses Legislative Meeting**  
 Candidate Name: **002** Category/Type: **002**  
 Amount of Each Disbursement this Period: **22021**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)

B. **Berry, Claude**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **1795 Wells Station**  
 City: **Memphis** State: **TN** Zip Code: **38108**  
 Date of Disbursement: **05/05/2009**  
 Purpose of Disbursement: **Travel Expenses Legislative Meeting**  
 Candidate Name: **002** Category/Type: **002**  
 Amount of Each Disbursement this Period: **38421**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)

C. **Brown, James**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **P.O. Box 7**  
 City: **Hohenwald** State: **TN** Zip Code: **38462**  
 Date of Disbursement: **05/05/2009**  
 Purpose of Disbursement: **Travel Expenses Legislative Meeting**  
 Candidate Name: **002** Category/Type: **002**  
 Amount of Each Disbursement this Period: **29781**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)

**SUBTOTAL** of Disbursements This Page (optional)..... **90223**  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 2

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

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NAME OF COMMITTEE (In Full)

**Fraternal Order of Police Tennessee State Lodge PAC Fund**

Full Name (Last, First, Middle Initial)

A. <u>Collins, John</u>		Date of Disbursement
Mailing Address <u>5701 Taggard Drive</u>		<u>05</u> / <u>05</u> / <u>2009</u>
City <u>Hixson</u> State <u>TN</u> Zip Code <u>37343</u>		
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period
Candidate Name		<u>308.17</u>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <u>002</u>
State: _____ District: _____		

B. <u>Cowan, David</u>		Date of Disbursement
Mailing Address <u>7602 Sims Rd</u>		<u>02</u> / <u>10</u> / <u>2009</u>
City <u>Chattanooga</u> State <u>TN</u> Zip Code <u>37341</u>		
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period
Candidate Name		<u>409.20</u>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <u>002</u>
State: _____ District: _____		

C. <u>Edmondson, John</u>		Date of Disbursement
Mailing Address <u>316 Harold Drive</u>		<u>05</u> / <u>05</u> / <u>2009</u>
City <u>Clarksville</u> State <u>TN</u> Zip Code <u>37040</u>		
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period
Candidate Name		<u>269.01</u>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <u>002</u>
State: _____ District: _____		

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

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

986.38

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 12

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

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NAME OF COMMITTEE (In Full)

**Fraternal Order of Police Tennessee State Lodge PAC Fund**

Full Name (Last, First, Middle Initial)

A. <b>Ewton, Eric</b>		Date of Disbursement
Mailing Address <b>182 Amy Lane</b>		<b>05 ' 05 ' 2009</b>
City <b>Dayton</b>	State <b>TN</b>	Zip Code <b>37321</b>
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period
Candidate Name		<b>35221</b>
Office Sought:	Disbursement For:	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>002</b>
State:	District:	

B. <b>Frazier, Brian</b>		Date of Disbursement
Mailing Address <b>611 Grassland Drive</b>		<b>05 ' 05 ' 2009</b>
City <b>Maryville</b>	State <b>TN</b>	Zip Code <b>37804</b>
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period
Candidate Name		<b>21300</b>
Office Sought:	Disbursement For:	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>002</b>
State:	District:	

C. <b>Gafford, James</b>		Date of Disbursement
Mailing Address <b>3221 Thoroughbred Drive</b>		<b>03 ' 14 ' 2009</b>
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37211</b>
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period
Candidate Name		<b>100202</b>
Office Sought:	Disbursement For:	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>002</b>
State:	District:	

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

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

**156723**

29030122854



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

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

FOR LINE NUMBER:  
(check only one)

PAGE **4** OF **2**

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

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NAME OF COMMITTEE (In Full)

**Fraternal Order of Police Tennessee State Lodge PAC Fund**

Full Name (Last, First, Middle Initial)

A. <b>Gragg, Dan</b>		Date of Disbursement
Mailing Address <b>300 Meadow Creek Rd</b>		<b>05 / 05 / 2009</b>
City <b>Monterey</b> State <b>TN</b> Zip Code <b>38574</b>		
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		
Candidate Name		Amount of Each Disbursement this Period <b>29621</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

B. <b>Guidry, Suzanne</b>		Date of Disbursement
Mailing Address <b>720 Highland Ave</b>		<b>05 / 05 / 2009</b>
City <b>Loudon</b> State <b>TN</b> Zip Code <b>37714</b>		
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		
Candidate Name		Amount of Each Disbursement this Period <b>36741</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

C. <b>Hall, Brent</b>		Date of Disbursement
Mailing Address <b>3106 Heatherglan Drive</b>		<b>05 / 05 / 2009</b>
City <b>Maryville</b> State <b>TN</b> Zip Code <b>37801</b>		
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		
Candidate Name		Amount of Each Disbursement this Period <b>32421</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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

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

**98783**

29030122855

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 12

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

**Fraternal Order of Police Tennessee State Lodge PAC Fund**

Full Name (Last, First, Middle Initial)

A. **Haynes, Ross**

Date of Disbursement

05 / 05 / 2009

Mailing Address

P.O. Box 4113

City

Knoxville

State

TN

Zip Code

37921

Purpose of Disbursement

**Travel Expenses Legislative Meeting**

002

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

36404

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **Hicks, James**

Date of Disbursement

05 / 05 / 2009

Mailing Address

3448 Fountain Park

City

Knoxville

State

TN

Zip Code

37917

Purpose of Disbursement

**Travel Expenses Legislative Meeting**

002

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

38341

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. **Hogan, Dicky**

Date of Disbursement

05 / 05 / 2009

Mailing Address

107 Judith Drive

City

Knoxville

State

TN

Zip Code

37920

Purpose of Disbursement

**Travel Expenses Legislative Meeting**

002

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

22104

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

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

96849

29030122856

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 2
	<input checked="" type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 28a
	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c
	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
**Fraternal Order of Police Tennessee State Lodge PAC Fund**

A. Full Name (Last, First, Middle Initial) <b>Jacques, Chris</b>		Date of Disbursement <b>05 ' 05 ' 2009</b>
Mailing Address <b>2324 Raines Drive</b>		
City <b>Cleveland</b>	State <b>TN</b>	Zip Code <b>37311</b>
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period <b>33221</b>
Candidate Name		Category/Type <b>002</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

B. Full Name (Last, First, Middle Initial) <b>King, Jay</b>		Date of Disbursement <b>05 ' 05 ' 2009</b>
Mailing Address <b>1300 Asbury Glimp Rd</b>		
City <b>Bipley</b>	State <b>TN</b>	Zip Code <b>38063</b>
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period <b>36351</b>
Candidate Name		Category/Type <b>002</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

C. Full Name (Last, First, Middle Initial) <b>Leffew, David</b>		Date of Disbursement <b>05 ' 05 ' 2009</b>
Mailing Address <b>P.O. BOX 4864</b>		
City <b>Oak Ridge</b>	State <b>TN</b>	Zip Code <b>37831</b>
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period <b>34821</b>
Candidate Name		Category/Type <b>002</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<b>104393</b>
TOTAL This Period (last page this line number only).....▶	

29030122857

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 7 OF 12
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)  
**Fraternal Order of Police Tennessee State Lodge PAC Fund**

A. **Lockhart, Randall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **102 Hobbs Ridge Rd**  
 City: **Dunlap** State: **TN** Zip Code: **37327**  
 Date of Disbursement: **05/05/2009**  
 Purpose of Disbursement: **Travel Expenses Legislative Meeting**  
 Candidate Name: **002** Category/Type  
 Amount of Each Disbursement this Period: **329.01**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)

B. **Loveitt, Kenneth**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **1965 Sheffield Lane**  
 City: **Columbia** State: **TN** Zip Code: **38401**  
 Date of Disbursement: **05/05/2009**  
 Purpose of Disbursement: **Travel Expenses Legislative Meeting**  
 Candidate Name: **002** Category/Type  
 Amount of Each Disbursement this Period: **260.21**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)

C. **McCroskey, Stan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **8213 Wiebels Drive**  
 City: **Knoxville** State: **TN** Zip Code: **37931**  
 Date of Disbursement: **05/05/2009**  
 Purpose of Disbursement: **Travel Expenses Legislative Meeting**  
 Candidate Name: **002** Category/Type  
 Amount of Each Disbursement this Period: **363.81**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)

SUBTOTAL of Disbursements This Page (optional)..... **953.03**  
 TOTAL This Period (last page this line number only).....

29030122858

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 2 OF 2
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full)  
**Fraternal Order of Police Tennessee State Lodge PAC Fund**

A. Full Name (Last, First, Middle Initial) <b>Moore, Jim</b>		Date of Disbursement <b>05 05 2009</b>
Mailing Address <b>62 Albatross</b>		
City <b>Crossville</b>	State <b>TN</b>	Zip Code <b>38555</b>
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period <b>320211</b>
Candidate Name <b>Travel Expenses Legislative Meeting</b>		Category/Type <b>002</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) <b>Mowery, Robert</b>		Date of Disbursement <b>05 05 2009</b>
Mailing Address <b>6105 Shorwood Lane</b>		
City <b>Carryville</b>	State <b>TN</b>	Zip Code <b>37714</b>
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period <b>36421</b>
Candidate Name <b>Travel Expenses Legislative Meeting</b>		Category/Type <b>002</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) <b>Noe, Frank</b>		Date of Disbursement <b>05 05 2009</b>
Mailing Address <b>3065 Naomi Drive</b>		
City <b>Morristown</b>	State <b>TN</b>	Zip Code <b>37814</b>
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		Amount of Each Disbursement this Period <b>42262</b>
Candidate Name <b>Travel Expenses Legislative Meeting</b>		Category/Type <b>002</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	<b>110704</b>
TOTAL This Period (last page this line number only).....▶	

29030122859



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 12

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

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NAME OF COMMITTEE (In Full)

**Fraternal Order of Police Tennessee State Lodge PAC Fund**

Full Name (Last, First, Middle Initial)

A. <b>Russell, Bobby</b>		Date of Disbursement
Mailing Address <b>2324 Lovita Ave</b>		<b>05 ' 05 ' 2009</b>
City State Zip Code <b>Kingsport TN 37663</b>		
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		
Candidate Name		Amount of Each Disbursement this Period
		<b>45221</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. <b>Shiloh L-37</b>		Date of Disbursement
Mailing Address <b>P.O. Box 218</b>		<b>05 ' 05 ' 2009</b>
City State Zip Code <b>Adamsville TN 38310</b>		
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		
Candidate Name		Amount of Each Disbursement this Period
		<b>31621</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. <b>Tilson, David</b>		Date of Disbursement
Mailing Address <b>6905 Mount Royal Blvd.</b>		<b>05 ' 05 ' 2009</b>
City State Zip Code <b>Knoxville TN 37919</b>		
Purpose of Disbursement <b>Travel Expenses Legislative Meeting</b>		
Candidate Name		Amount of Each Disbursement this Period
		<b>36901</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

**113743**

29030122861

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 12

<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)

**Fraternal Order of Police Tennessee State Lodge PAC Fund**

Full Name (Last, First, Middle Initial)

A. **Trew, Shane**

Mailing Address

**810 Staples**

City

**Rockwood**

State

**TN**

Zip Code

**37854**

Purpose of Disbursement

**Travel Expenses Legislative Meeting**

Candidate Name

**002**  
Category/  
Type

Date of Disbursement

**05 / 05 / 2009**

Amount of Each Disbursement this Period

**332.21**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. **Whiteside, Shelia**

Mailing Address

**248 County Road 31**

City

**Biceville**

State

**TN**

Zip Code

**37370**

Purpose of Disbursement

**Travel Expenses Legislative Meeting**

Candidate Name

**002**  
Category/  
Type

Date of Disbursement

**05 / 05 / 2009**

Amount of Each Disbursement this Period

**440.42**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. **Wood, Albert**

Mailing Address

**1403 John Exum Pkwy**

City

**Johnson City**

State

**TN**

Zip Code

**37601**

Purpose of Disbursement

**Travel Expenses Legislative Meeting**

Candidate Name

**002**  
Category/  
Type

Date of Disbursement

**05 / 05 / 2009**

Amount of Each Disbursement this Period

**460.21**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

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

**1,232.84**

29030122862



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

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

FOR LINE NUMBER: (check only one)

PAGE 2 OF 2

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

**Fraternal Order of Police Tennessee State Lodge PAC Fund**

Full Name (Last, First, Middle Initial)

**A.** Worley, Jenny Date of Disbursement 05/05/2009  
 Mailing Address 2324 Volunteer Pkwy  
 City Bristol State TN Zip Code 37620  
 Purpose of Disbursement Travel Expenses Legislative Meeting Amount of Each Disbursement this Period 466.61  
 Candidate Name \_\_\_\_\_ Category/Type 002  
 Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼  
 State: \_\_\_\_\_ District: \_\_\_\_\_

**B.** \_\_\_\_\_ Date of Disbursement \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Purpose of Disbursement \_\_\_\_\_ Amount of Each Disbursement this Period \_\_\_\_\_  
 Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_  
 Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼  
 State: \_\_\_\_\_ District: \_\_\_\_\_

**C.** \_\_\_\_\_ Date of Disbursement \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Purpose of Disbursement \_\_\_\_\_ Amount of Each Disbursement this Period \_\_\_\_\_  
 Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_  
 Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) ▼  
 State: \_\_\_\_\_ District: \_\_\_\_\_

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

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

466.61

29030122863

**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.

29030122864

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS First Class Mail	Postmarked
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<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/14/09
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<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	

<input type="checkbox"/> USPS Express Mail	Postmarked
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<input type="checkbox"/> Postmark Illegible	
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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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 PREPARER	7/28/09 DATE PREPARED
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