

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Friends of Zach Wamp

ADDRESS (number and street) P.O. Box 24804 Check if different than previously reported. (ACC) Chattanooga TN 37422

2. FEC IDENTIFICATION NUMBER C00300681 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) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 07 19 2008 through 09 30 2008

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 L. Dan Johnson, II Signature of Treasurer Electronically Filed by L. Dan Johnson, II Date 01 28 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 FE5AN018 FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Friends of Zach Wamp

Report Covering the Period:

From: 

M	M
0	7

D	D
1	9

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	138428.69	975024.35
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	138428.69	973924.35
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	149903.41	1031961.09
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2137.24
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	149903.41	1029823.85
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>712050.42</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**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

Write or Type Committee Name  
Friends of Zach Wamp

Report Covering the Period: From: 

M	M
0	7

D	D
1	9

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

88428.69

630133.51

(ii) Unitemized.....

7575.00

43225.34

(iii) TOTAL of contributions

96003.69

673358.85

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

42425.00

301665.50

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

138428.69

975024.35

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(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

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

2137.24

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

3402.36

52007.31

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

141831.05

1029168.90

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	149903.41	1031961.09
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	1100.00
(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	1100.00
21. OTHER DISBURSEMENTS.....	11000.00	33200.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	160903.41	1066261.09

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	731122.78
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	141831.05
25. SUBTOTAL (add Line 23 and Line 24).....	872953.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	160903.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	712050.42

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 105  
(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)  
Friends of Zach Wamp

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

Mailing Address 1015 15th St NW

City State Zip Code  
Washington DC 20005-2605

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 05 / 2008

**Transaction ID:** 81010.C21431

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2300 Wilson Blvd Ste 400

City State Zip Code  
Arlington VA 22201-3308

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2008

**Transaction ID:** 80729.C21380

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
AGSH&F PAC

Mailing Address 1333 New Hampshire Ave NW

City State Zip Code  
Washington DC 20036-1500

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1125.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2008

**Transaction ID:** 80729.C21382

Amount of Each Receipt this Period  
1125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4125.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
American Bakers PAC

Mailing Address 1350 I Street,NW  
Suite 1290

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 26 / 2008

Transaction ID: 81010.C21647

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1120 COnnnecticut Ave.,NW

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2008

Transaction ID: 80729.C21376

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1101 Vermont Avenue,NW

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2008

Transaction ID: 81010.C21500

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 105

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Brunswick Good Govt. Fund

Mailing Address 800 S. Gay Street  
Ste. 1700

City State Zip Code  
Knoxville TN 37929

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
07 / 29 / 2008

**Transaction ID:** 80729.C21387

Amount of Each Receipt this Period  
3000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
CCA-PAC

Mailing Address 10 Burton Hills Blvd.

City State Zip Code  
Nashville TN 37215

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt  
08 / 28 / 2008

**Transaction ID:** 81010.C21514

Amount of Each Receipt this Period  
2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Cherokee Nation Businesses PAC

Mailing Address PO Box 948

City State Zip Code  
Tahlequah OK 74465-0948

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
07 / 23 / 2008

**Transaction ID:** 80729.C21381

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 7500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 105  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Chesapeake Energy Corp.PAC

Mailing Address PO Box 18576

City State Zip Code  
Oklahoma City OK 73154-0576

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 26 / 2008

Transaction ID: 81010.C21628

Amount of Each Receipt this Period  
2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O.Box 511

City State Zip Code  
Kingsport TN 37662

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2008

Transaction ID: 80729.C21379

Amount of Each Receipt this Period  
2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Energysolutions, LLC PAC

Mailing Address 423 W 300 South Suite 200

City State Zip Code  
Salt Lake City UT 84101-1102

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2008

Transaction ID: 80729.C21377

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Energysolutions, LLC PAC

Mailing Address 423 W 300 South Suite 200

City State Zip Code  
Salt Lake City UT 84101-1102

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt MM / DD / YYYY  
07 / 23 / 2008

**Transaction ID:** 80729.C21378

Amount of Each Receipt this Period 1000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 423 W 300 South Suite 200

City State Zip Code  
Salt Lake City UT 84101-1102

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt MM / DD / YYYY  
09 / 26 / 2008

**Transaction ID:** 81010.C21646

Amount of Each Receipt this Period 1500.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Exelon PAC

Mailing Address P.O.Box 805379

City State Zip Code  
Chicago IL 60680

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
07 / 29 / 2008

**Transaction ID:** 80729.C21388

Amount of Each Receipt this Period 1000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 3500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Honeywell International PAC

Mailing Address 1001 Constitution Avenue, NW  
Ste. 500 W

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 08 / 01 / 2008  
**Transaction ID:** 80801.C21394  
 Amount of Each Receipt this Period: 5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 655 15th St NW  
Suite 445

City Washington State DC Zip Code 20005-5701

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 08 / 01 / 2008  
**Transaction ID:** 80801.C21395  
 Amount of Each Receipt this Period: 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
MRF PAC

Mailing Address 236 Massachusetts Ave NE Ste 510  
#510

City Washington State DC Zip Code 20002-4972

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt: 09 / 05 / 2008  
**Transaction ID:** 81010.C21544  
 Amount of Each Receipt this Period: 300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 105  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address 1771 N St NW

City Washington State DC Zip Code 20036-2800

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 09 / 22 / 2008  
Transaction ID: 81010.C21623  
Amount of Each Receipt this Period: 1500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Nat. Ass.of Insur.& Financial Adv.

Mailing Address 2901 Telestar Ct

City Falls Church State VA Zip Code 22042-1260

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 15 / 2008  
Transaction ID: 81010.C21568  
Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Roane Co. Republican Party PAC

Mailing Address 247 High Pointe Village Way

City Kingston State TN Zip Code 37763-7083

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 05 / 2008  
Transaction ID: 81010.C21543  
Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 105

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
SAIC Voluntary PAC

Mailing Address 10260 Campus Point Drive  
Ms:F2

City State Zip Code  
San Diego CA 92121-1522

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
 Election Cycle-to-Date ▼ 4000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 5 / 2 0 0 8

Transaction ID: 81010.C21484

Amount of Each Receipt this Period

2000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
U.A. Political Education Committee

Mailing Address 901 Massachusetts Avenue N.W.

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
 Election Cycle-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 0 8

Transaction ID: 81010.C21475

Amount of Each Receipt this Period

5000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

7000.00

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

42425.00

# 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 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Frank H. Akers, Jr.	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 188 Whippoorwill Drive	<b>Transaction ID:</b> 81010.C21633
	City State Zip Code Oak Ridge TN 37830	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation U.T. Battelle Ass. Lab Dir. National Securit	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Edward S. Albers, Jr.	Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 403 Lyons Head Dr.	<b>Transaction ID:</b> 81010.C21615
	City State Zip Code Knoxville TN 37919	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Garrett B. Asher	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 136 S. Illinois Ave. Suite 201	<b>Transaction ID:</b> 81010.C21486
	City State Zip Code Oak Ridge TN 37830	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Ridge Realty President	
Receipt For: <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) .....	▶	1500.00
<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: PAGE 14 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address PO Box 1727

City Middlesboro State KY Zip Code 40965-3727

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

Name of Employer Appolo Fuels Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2075.00

Date of Receipt 09 / 26 / 2008

Transaction ID: 81010.C21636

Amount of Each Receipt this Period 250.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 100 Peabody Place Suite 1400

City Memphis State TN Zip Code 38103

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 590.00

Date of Receipt 08 / 22 / 2008

Transaction ID: 81010.C21491

Amount of Each Receipt this Period 120.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Merribel S. Ayres

Mailing Address 4301 Massachusetts Ave NW #5004

City Washington State DC Zip Code 20016-5562

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

Name of Employer Lighthouse Consulting Group Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 07 / 23 / 2008

Transaction ID: 80729.C21370

Amount of Each Receipt this Period 500.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **870.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 105  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial) J. Dean Baggett		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address P.O. Box 1773 406 W. Madison Avenue		Transaction ID: 81010.C21520
City Athens	State TN	Zip Code 37371
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-employed	Occupation Optometrist	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

**B.**

Full Name (Last, First, Middle Initial) John F. Bagley		Date of Receipt MM / DD / YYYY 07 / 23 / 2008
Mailing Address P.O. Box 19915		Transaction ID: 80729.C21374
City Alexandria	State VA	Zip Code 22320
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Battelle	Occupation Dir. External Relations	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Mary S. Ball		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
Mailing Address 6410 Cove Pointe Lane		Transaction ID: 81010.C21504
City Hixson	State TN	Zip Code 37343
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer McCallie School	Occupation Customer Service	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<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: PAGE 16 / 105  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address 1115 Treymour Way

City State Zip Code  
Knoxville TN 37922

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

Name of Employer Occupation  
Oak Ridge National Laboratory Economic Development Manager

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 81010.C21573

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 100 Peabody Place Suite 1400

City State Zip Code  
Memphis TN 38103

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

Name of Employer Occupation  
Belz Enterprises Real Estate Agent

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2008

Transaction ID: 81010.C21492

Amount of Each Receipt this Period  
80.00

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Ronald Belz

Mailing Address 100 Peabody Place Suite 1400

City State Zip Code  
Memphis TN 38103

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

Name of Employer Occupation  
Belz Enterprises Partner

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2008

Transaction ID: 81010.C21493

Amount of Each Receipt this Period  
40.00

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
John R. Bierly

Mailing Address 9317 Mountain Shade Drive

City State Zip Code  
Chattanooga TN 37421

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

Name of Employer Southeast Eye Specialists Occupation Opthamologist

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 1250.11

Date of Receipt  
MM / DD / YYYY  
08 / 29 / 2008

Transaction ID: 81010.C21661

Amount of Each Receipt this Period  
197.84

In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 9317 Mountain Shade Drive

City State Zip Code  
Chattanooga TN 37421

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

Name of Employer Southeast Eye Specialists Occupation Opthamologist

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2250.11

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: 81010.C21523

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ernest Boynton

Mailing Address P.O. Box 293

City State Zip Code  
Pikeville TN 37367

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2008

Transaction ID: 81010.C21426

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1297.84**

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

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

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

FOR LINE NUMBER: PAGE 18 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Sammye M. Brock

Mailing Address 240 S. Crest Road

City State Zip Code  
Chattanooga TN 37404

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2008

Transaction ID: 81010.C21564

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 11320 Berry Hill Dr.

City State Zip Code  
Knoxville TN 37931

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

Name of Employer Occupation  
Wackenhut Vice President

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2008

Transaction ID: 81010.C21456

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Annette Broom

Mailing Address 114 S. Forrest Ave.

City State Zip Code  
Lookout Mountain TN 37350

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 03 / 2008

Transaction ID: 81010.C21527

Amount of Each Receipt this Period  
150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1400.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address 2411 Lennox Court

City State Zip Code  
Chattanooga TN 37421

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

**Transaction ID:** 81010.C21532

Amount of Each Receipt this Period  
150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 400 Anatole Ln.

City State Zip Code  
Cleveland TN 37312

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

Name of Employer Occupation  
Ralph Buckner Funeral Home Owner

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 81010.C21411

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Lewis Card, Sr.

Mailing Address 1515 Heritage Landing Dr

City State Zip Code  
Chattanooga TN 37405-4254

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

Name of Employer Occupation  
Retired Retired

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2008

**Transaction ID:** 80801.C21391

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3150.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 105  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Lewis Card, Sr.

Mailing Address 1515 Heritage Landing Dr

City State Zip Code  
Chattanooga TN 37405-4254

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 4525.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

Transaction ID: 81010.C21610

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Charles Casey

Mailing Address P.O. Box 4269

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2008

Transaction ID: 80924.C21400

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Charlene Caswell

Mailing Address 208 Blair Rd

City State Zip Code  
Harriman TN 37748-4620

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

Name of Employer Restoration Services, Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2008

Transaction ID: 81010.C21463

Amount of Each Receipt this Period  
2300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3800.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Thomas C. Cate

Mailing Address PO Box 548

City Cleveland State TN Zip Code 37364-0548

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

Name of Employer Cate Brothers Development Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 19 / 2008

Transaction ID: 81010.C21569

Amount of Each Receipt this Period 2000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4714 Mountain Creek Road

City Chattanooga State TN Zip Code 37415

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2150.00

Date of Receipt 09 / 03 / 2008

Transaction ID: 81010.C21516

Amount of Each Receipt this Period 1000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Irene Catlin

Mailing Address 4714 Mountain Creek Road

City Chattanooga State TN Zip Code 37415

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2350.00

Date of Receipt 09 / 26 / 2008

Transaction ID: 81010.C21626

Amount of Each Receipt this Period 200.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3200.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 105  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Roger W. Catlin

Mailing Address 4714 Mountain Creek Road

City State Zip Code  
Chattanooga TN 37415

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

Name of Employer Self-employed Occupation  
Physician

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 1150.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: 81010.C21515

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Roger W. Catlin

Mailing Address 4714 Mountain Creek Road

City State Zip Code  
Chattanooga TN 37415

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

Name of Employer Self-employed Occupation  
Physician

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2450.00

Date of Receipt  
MM / DD / YYYY  
09 / 26 / 2008

Transaction ID: 81010.C21625

Amount of Each Receipt this Period  
1300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Jac Chambliss

Mailing Address Two Union Square  
1000 Tallan Building

City State Zip Code  
Chattanooga TN 37402

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

Name of Employer Chambliss-Bahner Occupation  
Attorney

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2008

Transaction ID: 80924.C21403

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2400.00**

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

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

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

FOR LINE NUMBER: PAGE 23 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address Two Union Square  
1000 Tallan Building

City State Zip Code  
Chattanooga TN 37402

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

Name of Employer Occupation  
Chambliss-Bahner Attorney

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 81010.C21572

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

600.00

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

Mailing Address 556 South Crest Road

City State Zip Code  
Chattanooga TN 37404

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

Name of Employer Occupation  
Retired Retired

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2008

Transaction ID: 81010.C21485

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

**C.** Full Name (Last, First, Middle Initial)  
Barbara Clark

Mailing Address 7317 Dayton Blvd.

City State Zip Code  
Hixson TN 37343

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

Name of Employer Occupation  
Retired Retired

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2008

Transaction ID: 81010.C21534

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

700.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Paul F. Clay

Mailing Address 10527 Eagle View Drive

City State Zip Code  
Knoxville TN 37922

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

Name of Employer Occupation  
Tetra Tech NUS Manager

Receipt For: Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 81010.C21574

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

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

Mailing Address 3051 Enclave Bay Drive

City State Zip Code  
Chattanooga TN 37415

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

Name of Employer Occupation  
Retired

Receipt For: Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 81010.C21607

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Henry Crumbliss, Jr.

Mailing Address 106 Augusta Drive

City State Zip Code  
Lookout Mountain TN 37350

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

Name of Employer Occupation  
Retired

Receipt For: Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 01 / 2008

Transaction ID: 80924.C21397

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Thomas W. Currey

Mailing Address 3707 Kings Road

City State Zip Code  
Chattanooga TN 37416

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self-employed Physician

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	0	8

Transaction ID: 81010.C21578

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 124 Chestnut Hill Road

City State Zip Code  
Oak Ridge TN 37830

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
U.T. Battelle Commercialization Mgr.

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	0	8

Transaction ID: 81010.C21547

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Alan Derthick

Mailing Address 602 Marr Drive

City State Zip Code  
Signal Mountain TN 37377

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	0	8

Transaction ID: 81010.C21490

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1150.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Robert S. Dover

Mailing Address 6316 Levi Rd.

City State Zip Code  
Hixson TN 37343

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
08 / 28 / 2008

**Transaction ID:** 81010.C21508

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 6470 Harbor Master Drive

City State Zip Code  
Hixson TN 37343

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Carta Transit, Exec. Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
09 / 19 / 2008

**Transaction ID:** 81010.C21580

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert Eby

Mailing Address 101 Winston Lane

City State Zip Code  
Oak Ridge TN 37830

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
USEC, Inc. Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
09 / 19 / 2008

**Transaction ID:** 81010.C21582

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">400.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 105  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

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

Mailing Address 72 S. Sequatchie Rd.  
P.O. Box 52

City State Zip Code  
Pikeville TN 37367

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

Name of Employer Occupation  
SETHRA Executive Director

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 2 2 / 2 0 0 8

Transaction ID: 81010.C21488

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Deborah Everley

Mailing Address 1008 Centennial Drive

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 0 8

Transaction ID: 81010.C21620

Amount of Each Receipt this Period  
240.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Ronald Feldman

Mailing Address 736 Georgia Avenue  
Suite 300

City State Zip Code  
Chattanooga TN 37402

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

Name of Employer Occupation  
Shumaker & Thompson Attorney

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81010.C21649

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **740.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Charles B. Felts, III

Mailing Address 1041 Riverhills Circle

City State Zip Code  
Chattanooga TN 37415

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

Name of Employer Occupation  
Self-employed Dentist

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: 81010.C21619

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 29 Carriage Hill

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer Occupation  
Enterprise Center Executive Director

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 450.00

Transaction ID: 81010.C21550

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
M. Scott Ferguson

Mailing Address 312 High Crest Road

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer Occupation  
Huffaker & Associates Executive Vice President

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 800.00

Transaction ID: 81010.C21460

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Rick Ferguson  
Mailing Address 100 Westview Lane  
City Oak Ridge State TN Zip Code 37830  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Restoration Services, Inc. Occupation Program Integration Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 09 / 05 / 2008  
Transaction ID: 81010.C21539  
Amount of Each Receipt this Period 2000.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Staci Ferguson  
Mailing Address 100 Westview Ln  
City Oak Ridge State TN Zip Code 37830-8657  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Restoration Services, Inc. Occupation Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 09 / 05 / 2008  
Transaction ID: 81010.C21540  
Amount of Each Receipt this Period 2000.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Doug Fisher  
Mailing Address 614 Ohio Avenue  
City Signal Mountain State TN Zip Code 37377  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Erlanger Medical Center Occupation Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 592.00  
Date of Receipt 09 / 10 / 2008  
Transaction ID: 81010.C21545  
Amount of Each Receipt this Period 312.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4312.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 105  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Homer Fisher

Mailing Address 183 Dusty Lane

City Powell State TN Zip Code 37849

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

Name of Employer Ut Occupation Senior Vice-President

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 08 / 15 / 2008

Transaction ID: 81010.C21476

Amount of Each Receipt this Period 250.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Stanley Fox

Mailing Address PO Box 160

City Clinton State TN Zip Code 37717-0160

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

Name of Employer Fox Chevrolet Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 3250.00

Date of Receipt 09 / 19 / 2008

Transaction ID: 81010.C21581

Amount of Each Receipt this Period 500.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

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

Mailing Address 636 Good Springs Road

City Brentwood State TN Zip Code 37027

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

Name of Employer Self Occupation CEO, Rest.Developer

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2008

Transaction ID: 81010.C21584

Amount of Each Receipt this Period 250.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Vance Fry

Mailing Address 7513 Island Manor Drive

City State Zip Code  
Harrison TN 37341

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 05 / 2008

**Transaction ID:** 81010.C21541

Amount of Each Receipt this Period 200.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Michael D. Gilley

Mailing Address 3110 Laurel Oaks Drive N.W.

City State Zip Code  
Cleveland TN 37312

FEC ID number of contributing federal political committee. C

Name of Employer Olin Corporation Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 08 / 15 / 2008

**Transaction ID:** 81010.C21482

Amount of Each Receipt this Period 100.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Michael D. Gilley

Mailing Address 3110 Laurel Oaks Drive N.W.

City State Zip Code  
Cleveland TN 37312

FEC ID number of contributing federal political committee. C

Name of Employer Olin Corporation Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 475.00

Date of Receipt 09 / 19 / 2008

**Transaction ID:** 81010.C21598

Amount of Each Receipt this Period 125.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 425.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
L. Barry Goss

Mailing Address 2301 Clipper Lane

City State Zip Code  
Knoxville TN 37922

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

Name of Employer Occupation  
Pro-2-Serve Owner

Receipt For: Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
 1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 28 / 2008

**Transaction ID:** 81010.C21513

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 7424 Flagstone Drive

City State Zip Code  
Ooltewah TN 37363

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

Name of Employer Occupation  
Life Care Centers Of America CPA

Receipt For: Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 22 / 2008

**Transaction ID:** 81010.C21497

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
W. Harvey Gray

Mailing Address 109 Winston Lane

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
U.T. Battelle National Security

Receipt For: Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 12 / 2008

**Transaction ID:** 81010.C21473

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1600.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
James C. Hall  
Mailing Address 1104 Shadyland Drive  
City Knoxville State TN Zip Code 37919  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 08 / 22 / 2008  
Transaction ID: 81010.C21494  
Amount of Each Receipt this Period: 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer: Washington Group International  
Occupation: Regional Vice President  
Election Cycle-to-Date: 1000.00  
Receipt For:  Primary  General  Other (specify) ▼

**B.** Full Name (Last, First, Middle Initial)  
Stephen H. Hall  
Mailing Address 7279 Autumn Lake Trail  
City Hixson State TN Zip Code 37343  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 09 / 29 / 2008  
Transaction ID: 81010.C21650  
Amount of Each Receipt this Period: 300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer: Jack Henry & Associates  
Occupation: systems Engineer  
Election Cycle-to-Date: 300.00  
Receipt For:  Primary  General  Other (specify) ▼

**C.** Full Name (Last, First, Middle Initial)  
Virginia Harris  
Mailing Address 1539 Hawks Lndg  
City College Dale State TN Zip Code 37363-9328  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 09 / 19 / 2008  
Transaction ID: 81010.C21579  
Amount of Each Receipt this Period: 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer: \_\_\_\_\_  
Occupation: Homemaker  
Election Cycle-to-Date: 225.00  
Receipt For:  Primary  General  Other (specify) ▼

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Fred J. Headrick

Mailing Address 934 Dunsinane Road

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 5 / 2 0 0 8

Transaction ID: 81010.C21483

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

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

Mailing Address 100 James Blvd Apt E414  
Apt. E-414

City State Zip Code  
Signal Mountain TN 37377-1884

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 0 8

Transaction ID: 81010.C21432

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

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

Mailing Address 3 Fortunes Way

City State Zip Code  
Signal Mountain TN 37377-2045

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

Name of Employer Occupation  
Arcadis Senior Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 0 8

Transaction ID: 80924.C21407

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) John W. Holden, Jr.	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address P. O. Box 1055	<b>Transaction ID:</b> 81010.C21587
	City State Zip Code Cleveland TN 37364	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Pioneer Group	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) David Houseman	Date of Receipt MM / DD / YYYY 08 / 07 / 2008
	Mailing Address 2903 Braly Pl	<b>Transaction ID:</b> 81010.C21461
	City State Zip Code Chattanooga TN 37415-5953	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Houseman & Associates	Occupation President	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael C. Hughes	Date of Receipt MM / DD / YYYY 08 / 12 / 2008
	Mailing Address 5285 Everett St	<b>Transaction ID:</b> 81010.C21472
	City State Zip Code West Richland WA 99353-8301	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Bechtel	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2350.00
<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 36 / 105
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael C. Hughes	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 5285 Everett St	<b>Transaction ID:</b> 81010.C21586
	City State Zip Code West Richland WA 99353-8301	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Bechtel Manager	
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Wayne Human	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 317 Davis Dr	<b>Transaction ID:</b> 81010.C21509
	City State Zip Code Kingston TN 37763-2202	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation TetraTech Executive	
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) J. Nelson Irvine	Date of Receipt MM / DD / YYYY 08 / 05 / 2008
	Mailing Address 4211 Lundy Mountain Lane	<b>Transaction ID:</b> 81010.C21450
	City State Zip Code Signal Mountain TN 37377	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Chambliss, Bahner & Stophel Attorney	
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	800.00
<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: PAGE 37 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address 445 Bridgewater Drive

City State Zip Code  
Mc Donald TN 37353

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

Name of Employer Occupation  
Jacobs & Associates Insurance Agent

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 81010.C21594

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 445 Bridgewater Dr

City State Zip Code  
Mc Donald TN 37353-5483

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 81010.C21593

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
John B. Jewell, III

Mailing Address 529 Sneed Rd

City State Zip Code  
Nashville TN 37221-4334

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

Name of Employer Occupation  
Tri-Star Energy, LLC CEO

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 81010.C21585

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Judith C. Johns  
Mailing Address 4037 E.Lamar Alexander Pkwy.  
City Walland State TN Zip Code 37886-2826  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BWXT-Y-12 Occupation Homeland Security Advisor  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 850.00  
Date of Receipt 08 / 07 / 2008  
Transaction ID: 81010.C21467  
Amount of Each Receipt this Period 100.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
L. Dan Johnson  
Mailing Address 113 Valleybrook Drive  
City Hixson State TN Zip Code 37343  
FEC ID number of contributing federal political committee. **C**  
Name of Employer City of Chattanooga Occupation Chief of Staff  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00  
Date of Receipt 09 / 29 / 2008  
Transaction ID: 81010.C21651  
Amount of Each Receipt this Period 1500.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
David Johnson  
Mailing Address 106 Wildcat Lane  
City Oak Ridge State TN Zip Code 37830  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 2550.00  
Date of Receipt 09 / 26 / 2008  
Transaction ID: 81010.C21634  
Amount of Each Receipt this Period 2300.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3900.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 105  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Doris Johnson

Mailing Address 3515 Edgewood CirIce

City Cleveland State TN Zip Code 37312

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

Name of Employer Hardees Franchises Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 900.00

Date of Receipt 09 / 03 / 2008

Transaction ID: 81010.C21518

Amount of Each Receipt this Period 100.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Doris Johnson

Mailing Address 3515 Edgewood CirIce

City Cleveland State TN Zip Code 37312

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

Name of Employer Hardees Franchises Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 1900.00

Date of Receipt 09 / 19 / 2008

Transaction ID: 81010.C21599

Amount of Each Receipt this Period 1000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Gary K. Kimsey

Mailing Address 444 Allen Rd

City Sweetwater State TN Zip Code 37874-5306

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

Name of Employer Gemtron Corp. Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 05 / 2008

Transaction ID: 81010.C21535

Amount of Each Receipt this Period 100.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Linda Kindrick

Mailing Address 189 Ross Estates Road

City State Zip Code  
Kingston TN 37763

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
TAG Transport Vice President

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 625.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

**Transaction ID:** 81010.C21638

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Darrel Kohlhorst

Mailing Address 541 Windham Hill Rd

City State Zip Code  
Knoxville TN 37934-4554

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
BWXT-Y-12 Executive

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3200.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	0	8

**Transaction ID:** 80729.C21373

Amount of Each Receipt this Period  
950.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Darrel Kohlhorst

Mailing Address 541 Windham Hill Rd

City State Zip Code  
Knoxville TN 37934-4554

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
BWXT-Y-12 Executive

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	0	8

**Transaction ID:** 80729.C21372

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1500.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Brenda Lawson  
Mailing Address P.O. Box 6056  
City Cleveland State TN Zip Code 37320-6056  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Brenda McKenzie & Company Occupation Owner  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 2621.00  
Date of Receipt 09 / 30 / 2008  
Transaction ID: 81010.C21652  
Amount of Each Receipt this Period 1121.00  
In-Kind  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Stan Lawson  
Mailing Address PO Box 6056  
City Cleveland State TN Zip Code 37320-6056  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Brenda Lawson & Assoc. Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00  
Date of Receipt 09 / 30 / 2008  
Transaction ID: 81010.C21653  
Amount of Each Receipt this Period 2300.00  
In-Kind  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Roger Layne  
Mailing Address 5012 Old Chestnut Ridge Rd  
City Signal Mtn State TN Zip Code 37377-1039  
FEC ID number of contributing federal political committee. **C**  
Name of Employer East Tech Occupation President/CEO  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1350.00  
Date of Receipt 08 / 01 / 2008  
Transaction ID: 80924.C21396  
Amount of Each Receipt this Period 250.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3671.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Tony Leach

Mailing Address 801 Chestnut Street

City State Zip Code  
Chattanooga TN 37402

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

Name of Employer Occupation  
Self-employed Optometrist

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

2000.00

Date of Receipt  
MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: 81010.C21525

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Kisoo Lee

Mailing Address 1528 Hawks Landing

City State Zip Code  
Ooltewah TN 37363

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

Name of Employer Occupation  
Hanmi Janitorial Service Owner

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

750.00

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2008

Transaction ID: 81010.C21499

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Allen Lupton, Jr.

Mailing Address 1201 Tallan Building

City State Zip Code  
Chattanooga TN 37402

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

Name of Employer Occupation  
Stone Fort Land Company, Inc. President

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

2800.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2008

Transaction ID: 81010.C21451

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 43 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Robert P. Main  
Mailing Address 3133 Bee Tree Lane  
City Signal Mountain State TN Zip Code 37377  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Siskin Hospital Occupation President/CEO  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt 08 / 22 / 2008  
Transaction ID: 81010.C21489  
Amount of Each Receipt this Period 100.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Daryl Mann  
Mailing Address 7813 Magnolia Lake Drive  
City Chattanooga State TN Zip Code 37421  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Optometrist  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1250.13  
Date of Receipt 08 / 29 / 2008  
Transaction ID: 81010.C21660  
Amount of Each Receipt this Period 197.85  
In-Kind  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Daryl Mann  
Mailing Address 7813 Magnolia Lake Drive  
City Chattanooga State TN Zip Code 37421  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Optometrist  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 2250.13  
Date of Receipt 09 / 03 / 2008  
Transaction ID: 81010.C21519  
Amount of Each Receipt this Period 1000.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1297.85  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 44 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address 125 Westlook Circle

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
University Of Tennessee Professor

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 26 / 2008

**Transaction ID:** 81010.C21632

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Betty F. McGrady-Ballard

Mailing Address 130 Rymer Road NW

City State Zip Code  
Cleveland TN 37312

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 81010.C21596

Amount of Each Receipt this Period  
300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Zane R. McNutt

Mailing Address 123 Pembroke Rd.

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
Retired Retired

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 81010.C21537

Amount of Each Receipt this Period  
35.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **435.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Howells D. Miller

Mailing Address 1502 Dalewood Drive

City State Zip Code  
Chattanooga TN 37411

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2008

Transaction ID: 80729.C21375

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 909 Brynewood Park Dr

City State Zip Code  
Chattanooga TN 37415-2303

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

Name of Employer State Of Tennessee Occupation Drivers License Examiner

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2008

Transaction ID: 81010.C21501

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Janie Moore

Mailing Address 3025 Parkwood Trail, NW

City State Zip Code  
Cleveland TN 37312

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 26 / 2008

Transaction ID: 81010.C21644

Amount of Each Receipt this Period  
300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **900.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Morgan Brothers		Date of Receipt
	Mailing Address P.O.Box 746		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 05 / 2008
	City	State	Zip Code
	Clarksville	TN	37041-0746
	FEC ID number of contributing federal political committee.		Transaction ID: 81010.C21437
		Amount of Each Receipt this Period	<input type="text"/> 250.00
Name of Employer		Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For:		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/> 650.00	
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Anne Moss		Date of Receipt
	Mailing Address 483 Kyle Ln NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 19 / 2008
	City	State	Zip Code
	Cleveland	TN	37312-6440
	FEC ID number of contributing federal political committee.		Transaction ID: 81010.C21597
		Amount of Each Receipt this Period	<input type="text"/> 300.00
Name of Employer Homemaker		Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For:		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text"/> 300.00	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) G.W. Murphy, Jr.		Date of Receipt
	Mailing Address 640 Old Poplar Springs Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 28 / 2008
	City	State	Zip Code
	Kingston	TN	37763
	FEC ID number of contributing federal political committee.		Transaction ID: 81010.C21512
		Amount of Each Receipt this Period	<input type="text"/> 250.00
Name of Employer Retired		Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For:		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text"/> 350.00	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 800.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 47 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Herb J. Newton	Date of Receipt MM / DD / YYYY 08 / 22 / 2008
	Mailing Address 10201 S River Trl	<b>Transaction ID:</b> 81010.C21487
	City State Zip Code Knoxville TN 37922-5667	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Herb Newton Nissan Occupation Owner Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Edward Peterson	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 2188 Sargent Daly Dr.	<b>Transaction ID:</b> 81010.C21521
	City State Zip Code Chattanooga TN 37421	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self Occupation Optometrist Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) David Phillips, Jr.	Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 2209 W Blount Ave	<b>Transaction ID:</b> 81010.C21622
	City State Zip Code Knoxville TN 37920-1956	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Aggregates USA Occupation President Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2250.00</b>
<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: PAGE 48 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Lee Pittman

Mailing Address 6845 Silver Cloud Cv

City Ooltewah State TN Zip Code 37363-7170

FEC ID number of contributing federal political committee. C

Name of Employer Dixie Produce Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 3200.00

Date of Receipt 09 / 22 / 2008

**Transaction ID:** 81010.C21614

Amount of Each Receipt this Period 700.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Susan Pittman

Mailing Address 6845 Silver Cloud Cove

City Ooltewah State TN Zip Code 37363

FEC ID number of contributing federal political committee. C

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 09 / 22 / 2008

**Transaction ID:** 81010.C21613

Amount of Each Receipt this Period 2300.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Rick Pollard

Mailing Address PO Box 4327  
2912 S.Hickory Street

City Chattanooga State TN Zip Code 37405-0327

FEC ID number of contributing federal political committee. C

Name of Employer Jake Marshall Occupation Contractor

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 08 / 01 / 2008

**Transaction ID:** 80801.C21393

Amount of Each Receipt this Period 2300.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 5300.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address 138 Whipporwill Drive

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
Power Strategies Lobbyist/Consultant

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

350.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2008

Transaction ID: 81010.C21457

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O. Box 427

City State Zip Code  
Chattanooga TN 37401

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

Name of Employer Occupation  
Retired Retired

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 26 / 2008

Transaction ID: 81010.C21641

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
William H. Price

Mailing Address 2912 Braly Place

City State Zip Code  
Chattanooga TN 37415

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

Name of Employer Occupation  
Retired Retired

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 26 / 2008

Transaction ID: 81010.C21642

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **525.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 105  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Benjamin R. Probasco

Mailing Address 112 Sumach Street

City State Zip Code  
Lookout Mountain TN 37350

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

Name of Employer Occupation  
KPH Development Real Estate Agent

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2008

Transaction ID: 80801.C21390

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Davis W. Ratcliff

Mailing Address 448 Ocoee Cir

City State Zip Code  
Ocoee TN 37361-3632

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

Name of Employer Occupation  
Riverbend Energy President

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 26 / 2008

Transaction ID: 81010.C21643

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
David Rechter

Mailing Address 6524 Sherwood Dr.

City State Zip Code  
Knoxville TN 37919

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

Name of Employer Occupation  
Rogers Group, Inc. Vice President

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2008

Transaction ID: 80801.C21389

Amount of Each Receipt this Period  
2300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3800.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) James B. Robinson	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 1727 Auburndale Ave.	<b>Transaction ID:</b> 80924.C21404
	City State Zip Code Chattanooga TN 37405	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Retired	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 650.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Steve Robinson	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 477 Hickory Hills Dr. NE	<b>Transaction ID:</b> 81010.C21552
	City State Zip Code Cleveland TN 37312	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Cleveland Plywood Owner	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael T. Rochford	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 12320 Vista Brook Lane	<b>Transaction ID:</b> 81010.C21629
	City State Zip Code Farragut TN 37934	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation U.T. Battelle Dir. Ofc. of Count. Intl.	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>500.00</b>
<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: PAGE 52 / 105  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Sandra Rowland

Mailing Address 3930 Azalea Drive, NW

City Cleveland State TN Zip Code 37312

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

Name of Employer Jones Management Occupation Exec. Assistant to President

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 22 / 2008

Transaction ID: 81010.C21612

Amount of Each Receipt this Period 2000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Larry Schlabach

Mailing Address 1614 Carroll Ln

City Chattanooga State TN Zip Code 37405-4319

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

Name of Employer Oncology/Hematology Assoc. Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2008

Transaction ID: 81010.C21609

Amount of Each Receipt this Period 1000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Charles G. Sedgwick

Mailing Address 7636 Lenox Trace

City Hixson State TN Zip Code 37343

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2008

Transaction ID: 81010.C21447

Amount of Each Receipt this Period 50.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3050.00**

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

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

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

FOR LINE NUMBER: PAGE 53 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Charles G. Sedgwick  
Mailing Address 7636 Lenox Trace  
City Hixson State TN Zip Code 37343  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 350.00  
Date of Receipt 09 / 15 / 2008  
Transaction ID: 81010.C21559  
Amount of Each Receipt this Period 50.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Owen Shea, Jr.  
Mailing Address 1403 Riverview Rd  
City Chattanooga State TN Zip Code 37405-3126  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Service Electric Co. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 750.00  
Date of Receipt 08 / 07 / 2008  
Transaction ID: 81010.C21465  
Amount of Each Receipt this Period 250.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
John C. Sinclair, III  
Mailing Address 12021 Broadwood Drive  
City Knoxville State TN Zip Code 37922  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BWXT-Y-12 Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 350.00  
Date of Receipt 09 / 15 / 2008  
Transaction ID: 81010.C21554  
Amount of Each Receipt this Period 100.00  
Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
S.M. Skipper

Mailing Address 3105 Stepping Rock Dr

City Apison State TN Zip Code 37302-7514

FEC ID number of contributing federal political committee. C

Name of Employer Brenda Lawson & Assoc. Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 19 / 2008

**Transaction ID:** 81010.C21570

Amount of Each Receipt this Period 2000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Mark E. Smith

Mailing Address 4385 Ocoee Street, N.

City Cleveland State TN Zip Code 37312

FEC ID number of contributing federal political committee. C

Name of Employer Smith Management Occupation Associate

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2008

**Transaction ID:** 81010.C21595

Amount of Each Receipt this Period 150.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Hunter J. Smith

Mailing Address 1160 Tennis Rd

City Charlottesville State VA Zip Code 22901-5031

FEC ID number of contributing federal political committee. C

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 05 / 2008

**Transaction ID:** 81010.C21538

Amount of Each Receipt this Period 500.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 2650.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
Steven L. Smith

Mailing Address 720 County Rd. 132

City State Zip Code  
Bryant AL 35958

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
S & S Auto repair Owner

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	7	/	2	0	0	8

**Transaction ID:** 81010.C21458

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Gordon L. Smith, Jr.

Mailing Address 1080 Constitution Drive

City State Zip Code  
Chattanooga TN 37405-4243

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	9	/	2	0	0	8

**Transaction ID:** 81010.C21605

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Thomas E. Steffner

Mailing Address 211 Healing Bluff Rd

City State Zip Code  
Chattanooga TN 37419-1021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

**Transaction ID:** 80924.C21402

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1600.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Gerry U. Stephens

Mailing Address 1516 Lyndhurst Drive

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 750.00

Date of Receipt: MM / DD / YYYY  
08 / 05 / 2008

Transaction ID: 81010.C21445

Amount of Each Receipt this Period: 50.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1267 Duane Road

City State Zip Code  
Chattanooga TN 37405

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

Name of Employer Self-employed Occupation Optometrist

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00

Date of Receipt: MM / DD / YYYY  
09 / 03 / 2008

Transaction ID: 81010.C21522

Amount of Each Receipt this Period: 1000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Harry W. Stowers, Jr.

Mailing Address 8733 Inlet Drive

City State Zip Code  
Knoxville TN 37922-6459

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

Name of Employer Stowers Machinery Corp. Occupation President

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
07 / 23 / 2008

Transaction ID: 80729.C21369

Amount of Each Receipt this Period: 500.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 105  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
T.M. Swingle

Mailing Address 206 Daytona Drive

City State Zip Code  
Chattanooga TN 37415

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 09 / 15 / 2008  
Transaction ID: 81010.C21560  
Amount of Each Receipt this Period: 250.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 598 Jenkins Rd NE

City State Zip Code  
Cleveland TN 37312

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

Name of Employer Tarver Distributing Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt: 09 / 26 / 2008  
Transaction ID: 81010.C21645  
Amount of Each Receipt this Period: 2000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Denise Taylor

Mailing Address 102 Woodcliff Circle

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer The Brow Gallery Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 1400.00

Date of Receipt: 08 / 01 / 2008  
Transaction ID: 80801.C21392  
Amount of Each Receipt this Period: 1000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 105  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
G. Robert Taylor

Mailing Address 2215 Harris Circle, NW

City State Zip Code  
Cleveland TN 37311

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

Name of Employer Occupation  
Bank of Cleveland Banker

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1100.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 26 / 2008

Transaction ID: 81010.C21627

Amount of Each Receipt this Period  
600.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1105 New Lake Rd

City State Zip Code  
Spring City TN 37381-5468

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

Name of Employer Occupation  
Self Business Developer

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 28 / 2008

Transaction ID: 81010.C21505

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert Thompson

Mailing Address P.O. Box 1495

City State Zip Code  
Cleveland TN 37364

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

Name of Employer Occupation  
Self-employed Attorney

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2008

Transaction ID: 81010.C21556

Amount of Each Receipt this Period  
150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address 6607 Chesterfield Ave

City State Zip Code  
Mc Lean VA 22101-5234

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 375.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2008

Transaction ID: 80729.C21371

Amount of Each Receipt this Period  
375.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1426 Wood Nymph Trail

City State Zip Code  
Lookout Mountain TN 30750

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

Name of Employer Information Requested Occupation Information Requested  
Fairlyland Pharmacy Owner

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2008

Transaction ID: 81010.C21429

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Pauline Wagner

Mailing Address 345 Westshore Drive

City State Zip Code  
Harriman TN 37748

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

Name of Employer Information Requested Occupation Information Requested  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 305.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2008

Transaction ID: 81010.C21443

Amount of Each Receipt this Period  
30.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **905.00**

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

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

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

FOR LINE NUMBER: PAGE 60 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Pauline Wagner  
Mailing Address 345 Westshore Drive  
City State Zip Code  
Harriman TN 37748  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 355.00  
Date of Receipt: MM / DD / YYYY  
09 / 19 / 2008  
Transaction ID: 81010.C21590  
Amount of Each Receipt this Period: 50.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Rudy H. Walldorf  
Mailing Address 109 East Eighth St.  
City State Zip Code  
Chattanooga TN 37402  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Herman Walldorf & Co. President  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 400.00  
Date of Receipt: MM / DD / YYYY  
09 / 19 / 2008  
Transaction ID: 81010.C21604  
Amount of Each Receipt this Period: 200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Douglas G. Warner  
Mailing Address 615 Grandview Ave.  
City State Zip Code  
Lookout Mountain TN 37350  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Porter Warner Industries President  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 3300.00  
Date of Receipt: MM / DD / YYYY  
09 / 10 / 2008  
Transaction ID: 81010.C21549  
Amount of Each Receipt this Period: 2300.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2550.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 61 / 105  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

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

Mailing Address 6111 Shallowford Rd.  
Ste. 105

City State Zip Code  
Chattanooga TN 37421

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

Name of Employer Prudential RCR Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 03 / 2008

Transaction ID: 81010.C21524

Amount of Each Receipt this Period 1000.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1328 Skipwith Road

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer USEC, Inc. Occupation President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2008

Transaction ID: 81010.C21474

Amount of Each Receipt this Period 500.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 286 Whitmire Road

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer Big Ridge Cleaners Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Election Cycle-to-Date ▼ 900.00

Date of Receipt 08 / 07 / 2008

Transaction ID: 81010.C21462

Amount of Each Receipt this Period 100.00

Receipt  Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 105  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Ralph Whitmire, Jr.  
Mailing Address 286 Whitmire Road

City State Zip Code  
Signal Mountain TN 37377

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

Name of Employer Occupation  
Big Ridge Cleaners Owner

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 26 / 2008

Transaction ID: 81010.C21640

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Justin P. Wilson  
Mailing Address 206 Craighead Avenue

City State Zip Code  
Nashville TN 37205

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

Name of Employer Occupation  
Waller, Landsen, Dortch, Davis Attorney

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4600.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2008

Transaction ID: 81010.C21548

Amount of Each Receipt this Period  
2300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Stephen Wright  
Mailing Address 3933 Clairmont Drive NE

City State Zip Code  
Cleveland TN 37311

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

Name of Employer Occupation  
Wright Brothers Construction Vice President

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2008

Transaction ID: 81010.C21558

Amount of Each Receipt this Period  
2000.00

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2400.00

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

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

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

FOR LINE NUMBER: PAGE 63 / 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Wright Bros. Construction Co.  
Mailing Address P.O.Box 437  
City Charleston State TN Zip Code 37310  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 4300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2008  
Transaction ID: 81010.C21557  
Amount of Each Receipt this Period  
2000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Richard E. Zeigler  
Mailing Address PO Box 5954  
City Oak Ridge State TN Zip Code 37831-5954  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Oak Ridge National Laboratory Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2008  
Transaction ID: 81010.C21453  
Amount of Each Receipt this Period  
250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	88428.69

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 105  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
FSG Bank

Mailing Address P.O.Box 11247

City State Zip Code  
Chattanooga TN 37401-

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) Other

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2008

Transaction ID: 81010.C21657

Amount of Each Receipt this Period  
233.32

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

10598.73

**B.**

Full Name (Last, First, Middle Initial)  
FSG Bank

Mailing Address P.O.Box 11247

City State Zip Code  
Chattanooga TN 37401-

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) Other

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2008

Transaction ID: 81010.C21658

Amount of Each Receipt this Period  
233.82

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

10832.55

**C.**

Full Name (Last, First, Middle Initial)  
FSG Bank

Mailing Address P.O.Box 11247

City State Zip Code  
Chattanooga TN 37401-

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) Other

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2008

Transaction ID: 81010.C21659

Amount of Each Receipt this Period  
226.76

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

11059.31

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **693.90**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 105

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.**

Full Name (Last, First, Middle Initial)  
First Tennessee Bank

Mailing Address 701 Market Street

City State Zip Code  
Chattanooga TN 37402-

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  Other

Election Cycle-to-Date ▼ 39327.45

Date of Receipt 07 / 31 / 2008

**Transaction ID:** 81010.C21654

Amount of Each Receipt this Period 1087.91

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
First Tennessee Bank

Mailing Address 701 Market Street

City State Zip Code  
Chattanooga TN 37402-

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  Other

Election Cycle-to-Date ▼ 40138.22

Date of Receipt 08 / 31 / 2008

**Transaction ID:** 81010.C21655

Amount of Each Receipt this Period 810.77

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
First Tennessee Bank

Mailing Address 701 Market Street

City State Zip Code  
Chattanooga TN 37402-

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  Other

Election Cycle-to-Date ▼ 40948.00

Date of Receipt 09 / 30 / 2008

**Transaction ID:** 81010.C21656

Amount of Each Receipt this Period 809.78

Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2708.46</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">3402.36</span>

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
AHEAD, Inc. AHEAD, Inc.

Mailing Address 270 Samuel Barnet Blvd

City State Zip Code  
New Bedford MA 02745-1219

Purpose of Disbursement  
Fundraising Costs

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81010.E5074  
Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

4952.14

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUNDRAISING COSTS

B.

Full Name (Last, First, Middle Initial)  
Aristotle

Mailing Address 205 Pennsylvania Ave., SE

City State Zip Code  
Washington DC 20003-

Purpose of Disbursement  
Wire Transfer Fee

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81010.E5051  
Date of Disbursement

08 / 21 / 2008

Amount of Each Disbursement this Period

38.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

WIRE TRANSFER FEE

C.

Full Name (Last, First, Middle Initial)  
Aristotle

Mailing Address 205 Pennsylvania Ave., SE

City State Zip Code  
Washington DC 20003-

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80929.E5021  
Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

3250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SOFTWARE

SUBTOTAL of Disbursements This Page (optional) ▶

8240.64

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<p><b>A.</b> Full Name (Last, First, Middle Initial) Aristotle</p> <p>Mailing Address 205 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement Wire Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81010.E5076</p> <p>Date of Disbursement 09 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 51.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>WIRE TRANSFER</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Atomic Films, Inc.</p> <p>Mailing Address 1214 Dartmouth Street</p> <p>City Chattanooga State TN Zip Code 37405-</p> <p>Purpose of Disbursement Production Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80929.E5003</p> <p>Date of Disbursement 07 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 955.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PRODUCTION COSTS</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Atomic Films, Inc.</p> <p>Mailing Address 1214 Dartmouth Street</p> <p>City Chattanooga State TN Zip Code 37405-</p> <p>Purpose of Disbursement Production Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80929.E5004</p> <p>Date of Disbursement 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 7311.57</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PRODUCTION COSTS</b></p>

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

**8318.51**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
BankCard Center

Mailing Address P.O. Box 1545

City Memphis State TN Zip Code 38101-1545

Purpose of Disbursement  
SEE BELOW-Travel & FR Costs

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81010.E5077  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	0	8

Amount of Each Disbursement this Period

3	9	5	0	.	0	1
---	---	---	---	---	---	---

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SEE BELOW-TRAVEL & FR COSTS

B.

Full Name (Last, First, Middle Initial)  
Federal Express

Mailing Address 3966 Airways Blvd

City Memphis State TN Zip Code 38116-

Purpose of Disbursement  
Shipping

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81010.E5078  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	0	8

Amount of Each Disbursement this Period

1	3	4	.	5	4
---	---	---	---	---	---

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]  
MEMO: SHIPPING

C.

Full Name (Last, First, Middle Initial)  
The Caucus Room

Mailing Address 401 9th Street NW  
Market Square North

City Washington State DC Zip Code 20004-

Purpose of Disbursement  
FR Costs

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81010.E5079  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	0	8

Amount of Each Disbursement this Period

3	3	0	.	0	0
---	---	---	---	---	---

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]  
MEMO: FR COSTS

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

3	9	5	.	0	1
---	---	---	---	---	---

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

3	9	5	.	0	1
---	---	---	---	---	---

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b> Full Name (Last, First, Middle Initial) BankCard Center <hr/> Mailing Address P.O. Box 1545 <hr/> City Memphis State TN Zip Code 38101-1545 <hr/> Purpose of Disbursement SEE BELOW-Travel & FR Costs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5083 Date of Disbursement 08 / 27 / 2008
	Amount of Each Disbursement this Period 3933.76
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	SEE BELOW-TRAVEL & FR COSTS

<b>B.</b> Full Name (Last, First, Middle Initial) Delta Airlines <hr/> Mailing Address Hartsfield Airport <hr/> City Atlanta State GA Zip Code 30354- <hr/> Purpose of Disbursement Air Fare Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5084 Date of Disbursement 08 / 27 / 2008
	Amount of Each Disbursement this Period 588.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: AIR FARE

<b>C.</b> Full Name (Last, First, Middle Initial) Ramada Mall of America <hr/> Mailing Address 2300 American Blvd E <hr/> City Minneapolis State MN Zip Code 55425-1220 <hr/> Purpose of Disbursement Lodging Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5086 Date of Disbursement 08 / 27 / 2008
	Amount of Each Disbursement this Period 400.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: LODGING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3933.76
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Best Buy</p> <p>Mailing Address 2290 Gunbarrel Rd</p> <p>City Chattanooga State TN Zip Code 37421-2609</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81011.E5087</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 749.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) California Cafe</p> <p>Mailing Address 368 South Boulevard</p> <p>City Minneapolis State MN Zip Code 55425-</p> <p>Purpose of Disbursement FR Luncheon</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81011.E5085</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: FR LUNCHEON</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address 3966 Airways Blvd</p> <p>City Memphis State TN Zip Code 38116-</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81011.E5088</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 55.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: SHIPPING</p>

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

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BankCard Center</p> <p>Mailing Address P.O. Box 1545</p> <p>City Memphis State TN Zip Code 38101-1545</p> <p>Purpose of Disbursement SEE BELOW-Travel &amp; FR Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81011.E5092</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6530.70"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>SEE BELOW-TRAVEL &amp; FR COSTS</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address Hartsfield Airport</p> <p>City Atlanta State GA Zip Code 30354-</p> <p>Purpose of Disbursement Air Fare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81011.E5095</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: AIR FARE</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ramada Mall of America</p> <p>Mailing Address 2300 American Blvd E</p> <p>City Minneapolis State MN Zip Code 55425-1220</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81011.E5096</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1723.96"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: LODGING</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="6530.70"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.	Full Name (Last, First, Middle Initial) California Cafe  Mailing Address 368 South Boulevard  City Minneapolis State MN Zip Code 55425-  Purpose of Disbursement FR Luncheon Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5098 Date of Disbursement 09 / 30 / 2008  Amount of Each Disbursement this Period 4309.58  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: FR LUNCHEON
B.	Full Name (Last, First, Middle Initial) Members Dining Room  Mailing Address House of Representatives  City Washington State DC Zip Code 20515-  Purpose of Disbursement Membership Meetings Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5100 Date of Disbursement 09 / 30 / 2008  Amount of Each Disbursement this Period 78.05  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: MEMBERSHIP MEETINGS
C.	Full Name (Last, First, Middle Initial) Federal Express  Mailing Address 3966 Airways Blvd  City Memphis State TN Zip Code 38116-  Purpose of Disbursement Shipping Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5097 Date of Disbursement 09 / 30 / 2008  Amount of Each Disbursement this Period 47.83  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: SHIPPING

<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.	Full Name (Last, First, Middle Initial) Hilton Hotel Mailing Address 501 W Church Ave City Knoxville State TN Zip Code 37902-2506 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5101 Date of Disbursement 09 / 30 / 2008 Amount of Each Disbursement this Period 247.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: LODGING
B.	Full Name (Last, First, Middle Initial) Dicks Sporting Goods Mailing Address 2020 Gunbarrel Road City Chattanooga State TN Zip Code 37421- Purpose of Disbursement FR Gifts Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5094 Date of Disbursement 09 / 30 / 2008 Amount of Each Disbursement this Period 349.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: FR GIFTS
C.	Full Name (Last, First, Middle Initial) U S Airways Mailing Address P.O. Box 65 City Winston Salem State NC Zip Code 27102-0065 Purpose of Disbursement Air Fare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5099 Date of Disbursement 09 / 30 / 2008 Amount of Each Disbursement this Period 508.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: AIR FARE

<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b> Full Name (Last, First, Middle Initial) US House of Rep Gift Mailing Address B-217 Longworth Building City Washington State DC Zip Code 20515- Purpose of Disbursement FR Gifts Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5093 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2008
	Amount of Each Disbursement this Period 223.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: FR GIFTS

<b>B.</b> Full Name (Last, First, Middle Initial) John R. Bierly Mailing Address 9317 Mountain Shade Drive City Chattanooga State TN Zip Code 37421- Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81010.C21661IK Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2008
	Amount of Each Disbursement this Period 197.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 IN KIND:

<b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth A. Brewster Mailing Address 1534 Ribbonwood Dr City Lakesite State TN Zip Code 37379-8950 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E4981 Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2008
	Amount of Each Disbursement this Period 130.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TRAVEL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	328.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

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

Transaction ID: 80929.E4983  
Date of Disbursement

Mailing Address 1534 Ribbonwood Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	8

City Lakesite State TN Zip Code 37379-8950

Amount of Each Disbursement this Period

298.94
--------

Purpose of Disbursement

Travel

Category/Type
---------------

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

TRAVEL

State: District:

B.

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

Transaction ID: 80929.E4982  
Date of Disbursement

Mailing Address 1534 Ribbonwood Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	8

City Lakesite State TN Zip Code 37379-8950

Amount of Each Disbursement this Period

1141.62
---------

Purpose of Disbursement

Salary

Category/Type
---------------

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

SALARY

State: District:

C.

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

Transaction ID: 80929.E4984  
Date of Disbursement

Mailing Address 1534 Ribbonwood Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	0	8

City Lakesite State TN Zip Code 37379-8950

Amount of Each Disbursement this Period

1150.00
---------

Purpose of Disbursement

Salary

Category/Type
---------------

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

SALARY

State: District:

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

2590.56
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TOTAL This Period (last page this line number only) .....

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# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Elizabeth A. Brewster  Mailing Address 1534 Ribbonwood Dr  City Lakesite State TN Zip Code 37379-8950  Purpose of Disbursement Salary Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80929.E4985 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 8  Amount of Each Disbursement this Period 1141.63  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>SALARY</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Elizabeth A. Brewster  Mailing Address 1534 Ribbonwood Dr  City Lakesite State TN Zip Code 37379-8950  Purpose of Disbursement Salary Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80929.E4986 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 8  Amount of Each Disbursement this Period 890.50  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>SALARY</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Elizabeth A. Brewster  Mailing Address 1534 Ribbonwood Dr  City Lakesite State TN Zip Code 37379-8950  Purpose of Disbursement Travel Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80929.E4987 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 8  Amount of Each Disbursement this Period 301.28  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>TRAVEL</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2333.41</b>
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

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

Mailing Address 1534 Ribbonwood Dr

City Lakesite State TN Zip Code 37379-8950

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80929.E4988  
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

86.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

OFFICE SUPPLIES

B.

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

Mailing Address 1534 Ribbonwood Dr

City Lakesite State TN Zip Code 37379-8950

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80929.E4989  
Date of Disbursement

09 / 15 / 2008

Amount of Each Disbursement this Period

1150.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SALARY

C.

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

Mailing Address 1534 Ribbonwood Dr

City Lakesite State TN Zip Code 37379-8950

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81010.E5068  
Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1141.62

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

2378.22

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.	Full Name (Last, First, Middle Initial) The Bureau	Transaction ID: 81010.E5057 Date of Disbursement 08 / 14 / 2008
	Mailing Address 1108 Dayton Blvd	Amount of Each Disbursement this Period 600.00
	City Chattanooga State TN Zip Code 37405-2004	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  LOGO DESIGN
	Purpose of Disbursement Logo Design Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Cadas Cadas	Transaction ID: 81010.E5056 Date of Disbursement 08 / 14 / 2008
	Mailing Address 205 Minor St	Amount of Each Disbursement this Period 400.00
	City Chattanooga State TN Zip Code 37405-3834	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CONTRIBUTIONS
	Purpose of Disbursement Contributions Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Anderson County Chamber of Commerce	Transaction ID: 81010.E5047 Date of Disbursement 09 / 08 / 2008
	Mailing Address 245 North Main St., Suite 200	Amount of Each Disbursement this Period 115.00
	City Clinton State TN Zip Code 37716-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  DUES
	Purpose of Disbursement Dues Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1115.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

**A.** Full Name (Last, First, Middle Initial)  
Oak Ridge Chamber of Commerce

Mailing Address 1400 Oak Ridge Turnpike

City Oak Ridge State TN Zip Code 37830-

Purpose of Disbursement Dues

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** 81010.E5067  
**Date of Disbursement:** 09 / 25 / 2008

Amount of Each Disbursement this Period: 181.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**DUES**

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

Mailing Address PO Box 4348

City Chattanooga State TN Zip Code 37405-0348

Purpose of Disbursement Campaign Meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** 81010.E5058  
**Date of Disbursement:** 08 / 27 / 2008

Amount of Each Disbursement this Period: 250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**CAMPAIGN MEETING**

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

Mailing Address P.O. Box 182249

City Chattanooga State TN Zip Code 37422-

Purpose of Disbursement Internet Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** 80929.E5015  
**Date of Disbursement:** 08 / 08 / 2008

Amount of Each Disbursement this Period: 110.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**INTERNET SERVICES**

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 541.60

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) COMCAST  Mailing Address P.O. Box 182249  City Chattanooga State TN Zip Code 37422-  Purpose of Disbursement Internet Services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5016 Date of Disbursement 09 / 08 / 2008  Amount of Each Disbursement this Period 110.60  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  INTERNET SERVICES
<b>B.</b>	Full Name (Last, First, Middle Initial) Larmar Companies  Mailing Address PO Box 96030  City Baton Rouge State LA Zip Code 70896-9030  Purpose of Disbursement Advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81010.E5052 Date of Disbursement 07 / 25 / 2008  Amount of Each Disbursement this Period 41047.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  ADVERTISING
<b>C.</b>	Full Name (Last, First, Middle Initial) Jasons Deli  Mailing Address 2028 W End Ave  City Nashville State TN Zip Code 37203-2305  Purpose of Disbursement Campaign Meetings Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81010.E5053 Date of Disbursement 07 / 28 / 2008  Amount of Each Disbursement this Period 1359.14  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CAMPAIGN MEETINGS

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

**42516.74**

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ensign, Inc.</p> <p>Mailing Address 1300 South Crest Road</p> <p>City Rossville State GA Zip Code 30741-1599</p> <p>Purpose of Disbursement Flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81010.E5045 <b>Date of Disbursement</b> 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 221.91</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>FLOWERS</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) EPB Telecommunications</p> <p>Mailing Address P.O. Box 182250</p> <p>City Chattanooga State TN Zip Code 37422-</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80929.E5017 <b>Date of Disbursement</b> 08 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 218.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>TELEPHONE</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) EPB Telecommunications</p> <p>Mailing Address P.O. Box 182250</p> <p>City Chattanooga State TN Zip Code 37422-</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80929.E5018 <b>Date of Disbursement</b> 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 272.56</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>TELEPHONE</b></p>

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

**712.75**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sticky Fingers</p> <p>Mailing Address 500 Broad St</p> <p>City Chattanooga State TN Zip Code 37402-1221</p> <p>Purpose of Disbursement Campaign Meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81010.E5039 <b>Date of Disbursement</b> 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 5494.73</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>CAMPAIGN MEETING</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) First Tennessee Bank</p> <p>Mailing Address 701 Market Street</p> <p>City Chattanooga State TN Zip Code 37402-</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80929.E5012 <b>Date of Disbursement</b> 07 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2073.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL TAXES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) First Tennessee Bank</p> <p>Mailing Address 701 Market Street</p> <p>City Chattanooga State TN Zip Code 37402-</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81010.E5065 <b>Date of Disbursement</b> 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 2073.24</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL TAXES</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>9641.23</b>
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Chattanooga Times Free Press  Mailing Address 400 E. 11 St.  City Chattanooga State TN Zip Code 37403-  Purpose of Disbursement Subscriptions Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E4998 Date of Disbursement 07 / 23 / 2008  Amount of Each Disbursement this Period 37.50  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SUBSCRIPTIONS
<b>B.</b>	Full Name (Last, First, Middle Initial) Hometown Threads  Mailing Address 2020 Gunbarrel Road  City Chattanooga State TN Zip Code 37421-  Purpose of Disbursement FR Gifts Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81010.E5041 Date of Disbursement 08 / 28 / 2008  Amount of Each Disbursement this Period 91.67  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  FR GIFTS
<b>C.</b>	Full Name (Last, First, Middle Initial) Hometown Threads  Mailing Address 2020 Gunbarrel Road  City Chattanooga State TN Zip Code 37421-  Purpose of Disbursement FR Gifts Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81010.E5050 Date of Disbursement 09 / 24 / 2008  Amount of Each Disbursement this Period 764.75  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  FR GIFTS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	893.92
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
Brenda Lawson

Mailing Address P.O. Box 6056

City Cleveland State TN Zip Code 37320-6056

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81010.C21652IK  
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

1121.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

IN KIND:

B.

Full Name (Last, First, Middle Initial)  
Stan Lawson

Mailing Address PO Box 6056

City Cleveland State TN Zip Code 37320-6056

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81010.C21653IK  
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

2300.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

IN KIND:

C.

Full Name (Last, First, Middle Initial)  
Daryl Mann

Mailing Address 7813 Magnolia Lake Drive

City Chattanooga State TN Zip Code 37421-

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81010.C21660IK  
Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

197.85

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

IN KIND:

SUBTOTAL of Disbursements This Page (optional) ▶

3618.85

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
James McClure

Mailing Address 1901 Hidden Acorn Ct.

City Hixson State TN Zip Code 37343-

Purpose of Disbursement  
Campaign Meetings

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 81010.E5040  
Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

234.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CAMPAIGN MEETINGS

B.

Full Name (Last, First, Middle Initial)  
Sprint/Nextel Communications

Mailing Address 1505 Farm Credit Drive

City Mc Lean State VA Zip Code 22102-

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80929.E5019  
Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

310.78

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE

C.

Full Name (Last, First, Middle Initial)  
Sprint/Nextel Communications

Mailing Address 1505 Farm Credit Drive

City Mc Lean State VA Zip Code 22102-

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 80929.E5020  
Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

302.22

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE

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

847.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.	Full Name (Last, First, Middle Initial) Lexus of Chattanooga	Transaction ID: 80924.E4976 Date of Disbursement 07 / 22 / 2008
	Mailing Address 5800 Lee Highway	Amount of Each Disbursement this Period 500.00
	City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Candidate Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CANDIDATE TRAVEL

B.	Full Name (Last, First, Middle Initial) Lexus of Chattanooga	Transaction ID: 80924.E4977 Date of Disbursement 08 / 14 / 2008
	Mailing Address 5800 Lee Highway	Amount of Each Disbursement this Period 223.56
	City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Candidate Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CANDIDATE TRAVEL

C.	Full Name (Last, First, Middle Initial) Lexus of Chattanooga	Transaction ID: 80924.E4978 Date of Disbursement 08 / 27 / 2008
	Mailing Address 5800 Lee Highway	Amount of Each Disbursement this Period 500.00
	City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Candidate Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CANDIDATE TRAVEL

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

1223.56

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Lexus of Chattanooga Mailing Address 5800 Lee Highway City Chattanooga State TN Zip Code 37421- Purpose of Disbursement Candidate Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81010.E5066 Date of Disbursement 09 / 25 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CANDIDATE TRAVEL</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Office Depot Mailing Address 5756 Brainerd Road City Chattanooga State TN Zip Code 37411- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5000 Date of Disbursement 07 / 28 / 2008 Amount of Each Disbursement this Period 131.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>OFFICE SUPPLIES</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Office Depot Mailing Address 5756 Brainerd Road City Chattanooga State TN Zip Code 37411- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5001 Date of Disbursement 08 / 27 / 2008 Amount of Each Disbursement this Period 96.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>OFFICE SUPPLIES</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>728.01</b>
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address 5756 Brainerd Road

City State Zip Code  
Chattanooga TN 37411-

Purpose of Disbursement  
Office Supplies  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 80929.E5002  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	8

Amount of Each Disbursement this Period

45.81
-------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)  
Petty Cash

Mailing Address P.O. Box 24804

City State Zip Code  
Chattanooga TN 37422-

Purpose of Disbursement  
SEE BELOW-Office Supplies  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 81010.E5080  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	0	8

Amount of Each Disbursement this Period

317.36
--------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SEE BELOW-OFFICE SUPPLIES

C.

Full Name (Last, First, Middle Initial)  
Hamilton Co. Pachyderm

Mailing Address P. O. Box 4451

City State Zip Code  
Chattanooga TN 37405-

Purpose of Disbursement  
Membership Meetings  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 81010.E5081  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	0	8

Amount of Each Disbursement this Period

73.00
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Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**  
MEMO: MEMBERSHIP MEETINGS

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

363.17
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**TOTAL** This Period (last page this line number only) ..... ►

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# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Wal Mart Mailing Address Hamilton Place Village City Chattanooga State TN Zip Code 37421- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81010.E5082 Date of Disbursement 08 / 08 / 2008 Amount of Each Disbursement this Period 14.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	[MEMO ITEM] MEMO: OFFICE SUPPLIES
<b>B.</b>	Full Name (Last, First, Middle Initial) Petty Cash Mailing Address P.O. Box 24804 City Chattanooga State TN Zip Code 37422- Purpose of Disbursement SEE BELOW-Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5089 Date of Disbursement 09 / 04 / 2008 Amount of Each Disbursement this Period 291.16 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	SEE BELOW-OFFICE SUPPLIES
<b>C.</b>	Full Name (Last, First, Middle Initial) Hamilton Co. Pachyderm Mailing Address P. O. Box 4451 City Chattanooga State TN Zip Code 37405- Purpose of Disbursement Membership Meetings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5090 Date of Disbursement 09 / 04 / 2008 Amount of Each Disbursement this Period 98.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	[MEMO ITEM] MEMO: MEMBERSHIP MEETINGS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	291.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b> Full Name (Last, First, Middle Initial) Wal Mart Mailing Address Hamilton Place Village City Chattanooga State TN Zip Code 37421- Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81011.E5091 Date of Disbursement 09 / 04 / 2008 Amount of Each Disbursement this Period 39.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES
	Category/Type	

<b>B.</b> Full Name (Last, First, Middle Initial) Bradley Rentals Mailing Address 336 Grove Ave SW City Cleveland State TN Zip Code 37311-5719 Purpose of Disbursement Campaign Meetings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81010.E5038 Date of Disbursement 08 / 27 / 2008 Amount of Each Disbursement this Period 857.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAMPAIGN MEETINGS
	Category/Type	

<b>C.</b> Full Name (Last, First, Middle Initial) TN Republican Party Mailing Address 2323 Hillsboro Road City Nashville State TN Zip Code 37212- Purpose of Disbursement Transfer of excess campaign funds Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E4999 Date of Disbursement 07 / 26 / 2008 Amount of Each Disbursement this Period 25000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TRANSFER OF EXCESS CAMPAIGN FUNDS
	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	25857.61
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Ridge Greenhouse & Florist, Inc.  Mailing Address 148 Louisiana Ave.  City Oak Ridge State TN Zip Code 37830-4800 Purpose of Disbursement Flowers Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81010.E5046 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8	Amount of Each Disbursement this Period 66.88 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>FLOWERS</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Sams Club  Mailing Address 6101 Lee Hwy  City Chattanooga State TN Zip Code 37421- Purpose of Disbursement Office Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81010.E5037 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8	Amount of Each Disbursement this Period 70.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>OFFICE SUPPLIES</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) University of Tennessee  Mailing Address Cumberland Ave.  City Knoxville State TN Zip Code 37919- Purpose of Disbursement Fund Raising Costs Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81010.E5036 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 8	Amount of Each Disbursement this Period 94.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>FUND RAISING COSTS</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>230.88</b>
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
University of Tennessee

Mailing Address Cumberland Ave.

City Knoxville State TN Zip Code 37919-

Purpose of Disbursement  
Fund Raising Costs

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81010.E5048  
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

480.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUND RAISING COSTS

B.

Full Name (Last, First, Middle Initial)  
The Bolles Company

Mailing Address P.O. Box 22425

City Chattanooga State TN Zip Code 37422-

Purpose of Disbursement  
Fund Raising Costs

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81010.E5044  
Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

327.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUND RAISING COSTS

C.

Full Name (Last, First, Middle Initial)  
The Williams Company

Mailing Address 6130 Airways Blvd.

City Chattanooga State TN Zip Code 37421-

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80929.E4994  
Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

166.18

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PRINTING

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

973.93

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b> Full Name (Last, First, Middle Initial) The Williams Company Mailing Address 6130 Airways Blvd. City Chattanooga State TN Zip Code 37421- Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80929.E4995 <b>Date of Disbursement</b> <input type="text" value="08"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	Amount of Each Disbursement this Period <input type="text" value="1019.99"/>
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>PRINTING</b>
	<input type="text" value=""/>
<b>B.</b> Full Name (Last, First, Middle Initial) The Williams Company Mailing Address 6130 Airways Blvd. City Chattanooga State TN Zip Code 37421- Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80929.E4996 <b>Date of Disbursement</b> <input type="text" value="09"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	Amount of Each Disbursement this Period <input type="text" value="1611.92"/>
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>PRINTING</b>
	<input type="text" value=""/>
<b>C.</b> Full Name (Last, First, Middle Initial) The Williams Company Mailing Address 6130 Airways Blvd. City Chattanooga State TN Zip Code 37421- Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 80929.E4997 <b>Date of Disbursement</b> <input type="text" value="09"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	Amount of Each Disbursement this Period <input type="text" value="964.71"/>
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>PRINTING</b>
	<input type="text" value=""/>

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) U.S. Treasury  Mailing Address P.O. Box 660351  City Dallas State TX Zip Code 75266-  Purpose of Disbursement Federal Income Tax Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5022 Date of Disbursement 08 / 28 / 2008  Amount of Each Disbursement this Period 242.27  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  FEDERAL INCOME TAX
<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Tucker  Mailing Address P.O. Box 734  City Hixson State TN Zip Code 37343-  Purpose of Disbursement Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5008 Date of Disbursement 07 / 30 / 2008  Amount of Each Disbursement this Period 688.19  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  TRAVEL
<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Tucker  Mailing Address P.O. Box 734  City Hixson State TN Zip Code 37343-  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5007 Date of Disbursement 07 / 31 / 2008  Amount of Each Disbursement this Period 2098.75  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SALARY

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3029.21
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
Richard Tucker

Transaction ID: 80929.E5009  
Date of Disbursement

Mailing Address P.O. Box 734

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	8	

City Hixson State TN Zip Code 37343-

Amount of Each Disbursement this Period

2098.75
---------

Purpose of Disbursement  
Salary

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

SALARY

State: District:

B.

Full Name (Last, First, Middle Initial)  
Richard Tucker

Transaction ID: 80929.E5011  
Date of Disbursement

Mailing Address P.O. Box 734

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	8	

City Hixson State TN Zip Code 37343-

Amount of Each Disbursement this Period

354.69
--------

Purpose of Disbursement  
Travel

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

TRAVEL

State: District:

C.

Full Name (Last, First, Middle Initial)  
Richard Tucker

Transaction ID: 80929.E5010  
Date of Disbursement

Mailing Address P.O. Box 734

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	8	

City Hixson State TN Zip Code 37343-

Amount of Each Disbursement this Period

890.50
--------

Purpose of Disbursement  
Salary

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

SALARY

State: District:

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

3343.94
---------

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

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# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
Richard Tucker

Transaction ID: 81010.E5070  
Date of Disbursement

Mailing Address P.O. Box 734

09 / 29 / 2008

City Hixson State TN Zip Code 37343-

Amount of Each Disbursement this Period

2098.75

Purpose of Disbursement  
Salary

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

SALARY

State: District:

B.

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

Transaction ID: 80929.E4990  
Date of Disbursement

Mailing Address 6050 Shallowford Road

07 / 22 / 2008

City Chattanooga State TN Zip Code 37422-

Amount of Each Disbursement this Period

982.93

Purpose of Disbursement  
Postage

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

POSTAGE

State: District:

C.

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

Transaction ID: 80929.E4991  
Date of Disbursement

Mailing Address 6050 Shallowford Road

09 / 04 / 2008

City Chattanooga State TN Zip Code 37422-

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
Postage

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

POSTAGE

State: District:

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

4081.68

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

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

Mailing Address 6050 Shallowford Road

City State Zip Code  
Chattanooga TN 37422-

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80929.E4992  
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

981.79

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

POSTAGE

B.

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

Mailing Address 6050 Shallowford Road

City State Zip Code  
Chattanooga TN 37422-

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80929.E4993  
Date of Disbursement

09 / 17 / 2008

Amount of Each Disbursement this Period

1260.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

POSTAGE

C.

Full Name (Last, First, Middle Initial)  
Kim Wamp

Mailing Address 719 Hawks Nest

City State Zip Code  
Chattanooga TN 37419-

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 80929.E5005  
Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

1341.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SALARY

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

3582.79

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.	Full Name (Last, First, Middle Initial) Kim Wamp	Transaction ID: 80929.E5006 Date of Disbursement 08 / 29 / 2008
	Mailing Address 719 Hawks Nest	Amount of Each Disbursement this Period 1341.00
	City Chattanooga State TN Zip Code 37419-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SALARY

B.	Full Name (Last, First, Middle Initial) Kim Wamp	Transaction ID: 81010.E5069 Date of Disbursement 09 / 29 / 2008
	Mailing Address 719 Hawks Nest	Amount of Each Disbursement this Period 1341.00
	City Chattanooga State TN Zip Code 37419-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SALARY

C.	Full Name (Last, First, Middle Initial) Zach Wamp	Transaction ID: 81010.E5049 Date of Disbursement 09 / 11 / 2008
	Mailing Address 719 Hawks Nest	Amount of Each Disbursement this Period 239.95
	City Chattanooga State TN Zip Code 37409-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Candidate Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CANDIDATE TRAVEL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2921.95
<b>TOTAL</b> This Period (last page this line number only) .....	148715.54

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Barbara Blanton  Mailing Address 114 Fairway View Dr  City Shelbyville State TN Zip Code 37160-6780  Purpose of Disbursement CONTRIBUTION Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5024 Date of Disbursement 08 / 12 / 2008  Amount of Each Disbursement this Period 500.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Joe Carr Campaign  Mailing Address PO Box 192  City Lascassas State TN Zip Code 37085-0192  Purpose of Disbursement CONTRIBUTION Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5029 Date of Disbursement 09 / 02 / 2008  Amount of Each Disbursement this Period 500.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Parker for Congress  Mailing Address PO Box 16135  City Huntsville State AL Zip Code 35802-1663  Purpose of Disbursement CONTRIBUTION Candidate Name WAYNE PARKER, JR.  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81010.E5075 Date of Disbursement 09 / 29 / 2008  Amount of Each Disbursement this Period 1000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

<b>A.</b>	Full Name (Last, First, Middle Initial) David Davis Victory Fund  Mailing Address PO Box 781  City Johnson City State TN Zip Code 37605-0781  Purpose of Disbursement CONTRIBUTION Candidate Name DAVID DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 01 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5014 Date of Disbursement 08 / 04 / 2008  Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Vance Dennis Campaign  Mailing Address 55 Court St Ste B Suite B  City Savannah State TN Zip Code 38372-2495  Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5030 Date of Disbursement 09 / 02 / 2008  Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Chad Faulkner Campaign  Mailing Address 150 Sallings Rd  City Luttrell State TN Zip Code 37779-2118  Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80929.E5033 Date of Disbursement 09 / 02 / 2008  Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.	Full Name (Last, First, Middle Initial) Friends of Dan Ford	Transaction ID: 80929.E5026 Date of Disbursement 08 / 22 / 2008
	Mailing Address 2190 Hartford Rd	Amount of Each Disbursement this Period 500.00
	City Cosby State TN Zip Code 37722-3502	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Curtis Halford Campaign	Transaction ID: 80929.E5034 Date of Disbursement 09 / 02 / 2008
	Mailing Address 127 Old Dyer Trenton Rd	Amount of Each Disbursement this Period 500.00
	City Dyer State TN Zip Code 38330-4212	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steve Heath Campaign	Transaction ID: 80929.E5028 Date of Disbursement 09 / 02 / 2008
	Mailing Address PO Box 492	Amount of Each Disbursement this Period 500.00
	City Winchester State TN Zip Code 37398-0492	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.	Full Name (Last, First, Middle Initial) Duncan Hunter	Transaction ID: 81010.E5072 Date of Disbursement 09 / 29 / 2008
	Mailing Address 9568 Leyendekker Ct	Amount of Each Disbursement this Period 500.00
	City Lakeside State CA Zip Code 92040-4586	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name DUNCAN D HUNTER Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 52	
	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) John Kline for Congress	Transaction ID: 80929.E5035 Date of Disbursement 08 / 27 / 2008
	Mailing Address 101 W Burnsville Pkwy Ste 104 Suite 104	Amount of Each Disbursement this Period 1000.00
	City Burnsville State MN Zip Code 55337-2571	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name JOHN P. KLINE Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	
	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Albert McCall for State House	Transaction ID: 80929.E5025 Date of Disbursement 08 / 12 / 2008
	Mailing Address 3773 Big Springs Rd	Amount of Each Disbursement this Period 250.00
	City Lebanon State TN Zip Code 37090-9515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1750.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
Gerald McCormick Campaign

Transaction ID: 80929.E4980  
Date of Disbursement

Mailing Address 53311 Fairview Road

09 /  11 /  2008

City Hixson State TN Zip Code 37343-

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONTRIBUTION

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Porter for Congress

Transaction ID: 81010.E5073  
Date of Disbursement

Mailing Address P.O. Box 26087

09 /  29 /  2008

City Las Vegas State NV Zip Code 89126-

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONTRIBUTION

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name  
JON C PORTER, SR

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: NV District: 03

C.

Full Name (Last, First, Middle Initial)  
Bill Sanderson Campaign

Transaction ID: 80929.E5032  
Date of Disbursement

Mailing Address 115 E College St

09 /  02 /  2008

City Kenton State TN Zip Code 38233-1335

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONTRIBUTION

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

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) ..... ▶

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.	Full Name (Last, First, Middle Initial) Tony Shipley Campaign	Transaction ID: 80929.E5027 Date of Disbursement 09 / 02 / 2008
	Mailing Address PO Box 6173	Amount of Each Disbursement this Period 500.00
	City Kingsport State TN Zip Code 37663-1173	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jim Tracy Campaign	Transaction ID: 80929.E4979 Date of Disbursement 09 / 17 / 2008
	Mailing Address 102 Northwood Ave.	Amount of Each Disbursement this Period 250.00
	City Shelbyville State TN Zip Code 37160-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Committee to Elect Terry Lynn Weaver	Transaction ID: 80929.E5023 Date of Disbursement 08 / 12 / 2008
	Mailing Address 100 Seabowisha Ln	Amount of Each Disbursement this Period 500.00
	City Lancaster State TN Zip Code 38569-6239	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONTRIBUTION Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1250.00
<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 105 / 105

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

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NAME OF COMMITTEE (In Full)  
Friends of Zach Wamp

A.

Full Name (Last, First, Middle Initial)  
Tim Wirgau Campaign

Transaction ID: 80929.E5031

Date of Disbursement

Mailing Address 245 Savannah Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	8

City Buchanan State TN Zip Code 38222-5128

Amount of Each Disbursement this Period

500.00
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Purpose of Disbursement  
CONTRIBUTION

--

Category/  
Type

Candidate Name

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

500.00
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TOTAL This Period (last page this line number only) ..... ►

11000.00
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