

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
Lincoln Davis for Congress

ADDRESS (number and street) PO Box 350
 Check if different than previously reported. (ACC)
Jamestown TN 38556

2. **FEC IDENTIFICATION NUMBER** C00365015
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
TN 04

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 04 2008 in the State of TN

5. Covering Period 10 16 2008 through 11 24 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 Sharon B. Davis
Signature of Treasurer Electronically Filed by Sharon B. Davis Date 02 04 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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Lincoln Davis for Congress

Report Covering the Period:

From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 6 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

To:

| | |
|---|---|
| M | M |
| 1 | 1 |

| | |
|---|---|
| D | D |
| 2 | 4 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e))..... | 88228.85 | 1054987.68 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 0.00 | 2000.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 88228.85 | 1052987.68 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 77177.14 | 762843.27 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 77177.14 | 762843.27 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 76730.27 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

**POST-ELECTION DETAILED
SUMMARY PAGE**

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Lincoln Davis for Congress

Report Covering the Period: From: To:

I. RECEIPTS

| COLUMN A Total this Period | COLUMN B Election Cycle Total as of <input type="text" value="11"/> <input type="text" value="04"/> <input type="text" value="2008"/> (date of general election) | COLUMN C Total for <input type="text" value="11"/> <input type="text" value="05"/> <input type="text" value="2008"/> (date after general election) through <input type="text" value="11"/> <input type="text" value="24"/> <input type="text" value="2008"/> (last day of reporting period) |
|--|---|---|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other than Political Committees | | |
| (i) Itemized (Use Schedule A) | | |
| <input type="text" value="19726.65"/> | <input type="text" value="322776.65"/> | <input type="text" value="3300.00"/> |
| (ii) Unitemized | | |
| <input type="text" value="3475.00"/> | <input type="text" value="45624.83"/> | <input type="text" value="635.00"/> |
| (iii) Total of contributions from individuals | | |
| <input type="text" value="23201.65"/> | <input type="text" value="368401.48"/> | <input type="text" value="3935.00"/> |
| (b) Political Party Committees | | |
| <input type="text" value="0.00"/> | <input type="text" value="12225.00"/> | <input type="text" value="0.00"/> |
| (c) Other Political Committees | | |
| <input type="text" value="65027.20"/> | <input type="text" value="674361.20"/> | <input type="text" value="15000.00"/> |

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

| COLUMN A Total this Period | COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date) | COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates) |
|---|--|--|
| (d) The Candidate | | |
| 0.00 | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) | | |
| 88228.85 | 1054987.68 | 18935.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | |
| 0.00 | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate | | |
| 0.00 | 0.00 | 0.00 |
| (b). All Other Loans | | |
| 0.00 | 0.00 | 0.00 |
| (c). TOTAL LOANS (add Lines 13(a) and (b)) | | |
| 0.00 | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc) | | |
| 0.00 | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc) | | |
| 0.00 | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | | |
| 88228.85 | 1054987.68 | 18935.00 |

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

Lincoln Davis for Congress

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

II. DISBURSEMENTS

| COLUMN A Total this period | COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date) | COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date) |
|---|---|--|
| 17. OPERATING EXPENDITURES | | |
| 77177.14 | 762843.27 | 3842.71 |
| 18. TRANSFER TO OTHER AUTHORIZED COMMITTEES | | |
| 0.00 | 0.00 | 0.00 |
| 19. LOAN PAYMENTS | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | |
| 0.00 | 0.00 | 0.00 |
| (b) Of All Other Loans | | |
| 0.00 | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b)) | | |
| 0.00 | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| 0.00 | 0.00 | 0.00 |
| (b) Political Party Committees | | |
| 0.00 | 0.00 | 0.00 |

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

| COLUMN A Total this period | COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date) | Total for * Through * | COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date) |
|-------------------------------|---|--------------------------|--|
|-------------------------------|---|--------------------------|--|

(c) Other political committees (such as PACs)

| | | |
|------|---------|------|
| 0.00 | 2000.00 | 0.00 |
|------|---------|------|

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

| | | |
|------|---------|------|
| 0.00 | 2000.00 | 0.00 |
|------|---------|------|

21. OTHER DISBURSEMENTS

| | | |
|-----------|-----------|------|
| 188079.00 | 296008.69 | 0.00 |
|-----------|-----------|------|

22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

| | | |
|-----------|------------|---------|
| 265256.14 | 1060851.96 | 3842.71 |
|-----------|------------|---------|

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

| | | |
|----------|------------|----------|
| 88228.85 | 1052987.68 | 18935.00 |
|----------|------------|----------|

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

| | | |
|----------|-----------|---------|
| 77177.14 | 762843.27 | 3842.71 |
|----------|-----------|---------|

V. CASH SUMMARY

| | |
|--|-----------|
| 23. CASH ON HAND AT BEGINING OF REPORTING PERIOD | 253757.56 |
| 24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16)..... | 88228.85 |
| 25. SUBTOTAL(add Line 23 and Line 24) | 341986.41 |
| 26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22)..... | 265256.14 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25)..... | 76730.27 |

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

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

FOR LINE NUMBER: PAGE 7 / 64
(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)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
C2 Group LLC

Mailing Address 101 Constitution Ave NW Suite 900

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1326.65

Date of Receipt 10 / 16 / 2008

Transaction ID: SA11AI.22499

Amount of Each Receipt this Period 1326.65

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

B. Full Name (Last, First, Middle Initial)
Mary C. Clement

Mailing Address 4420 EBrookfield Dr

City Nashville State TN Zip Code 37205

FEC ID number of contributing federal political committee. C

Name of Employer State of Tennessee Occupation Director of Consumer Affairs

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2008

Transaction ID: SA11AI.22283

Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
Landon Colvard, Jr.

Mailing Address PO Box 3549

City Crossville State TN Zip Code 38557

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2008

Transaction ID: SA11AI.22463

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) 2576.65

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 8 / 64 |
| | <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)
Lincoln Davis for Congress

| | | | |
|---|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Jack Lewis Combs | | Date of Receipt MM / DD / YYYY 11 / 07 / 2008 |
| | Mailing Address 231 King Grant Road | | Transaction ID: SA11AI.22460 |
| | City Kingsport | State TN | Zip Code 37663 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| | Name of Employer 2nd Judicial District | Occupation Assistant District Attorney | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | | |

| | | | |
|---|---|---------------------------|---|
| B. | Full Name (Last, First, Middle Initial) David Crabtree | | Date of Receipt MM / DD / YYYY 10 / 31 / 2008 |
| | Mailing Address 1809 Farmington Dr | | Transaction ID: SA11AI.22402 |
| | City Franklin | State TN | Zip Code 37064 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| | Name of Employer Brookside Properties | Occupation Real Estate | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | | |

| | | | |
|---|---|-------------------|---|
| C. | Full Name (Last, First, Middle Initial) Justin Dell Crosslin | | Date of Receipt MM / DD / YYYY 10 / 31 / 2008 |
| | Mailing Address 1111 Nichol Lane | | Transaction ID: SA11AI.22451 |
| | City Nashville | State TN | Zip Code 37205 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| | Name of Employer Crosslin, Vaden & Associates | Occupation CPA | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | | |

| | | |
|--|---|---------|
| 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 9 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

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

Mailing Address 2323 Crestmoor Road

City Nashville State TN Zip Code 37763

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

Name of Employer GCA Publishing Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2008
Transaction ID: SA11AI.22454
 Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
Fred Dettwiller

Mailing Address 301 Great Circle Road

City Nashville State TN Zip Code 37228

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

Name of Employer DET Distributing Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2008
Transaction ID: SA11AI.22285
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
John P Dunn

Mailing Address 311 23rd Avenue N

City Nashville State TN Zip Code 37203

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

Name of Employer TN Health Department Occupation Director of Support Services

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2008
Transaction ID: SA11AI.22399
 Amount of Each Receipt this Period 250.00

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: (check only one) | PAGE 10 / 64 |
| | <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)
Lincoln Davis for Congress

| | | | |
|---|---|----------------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Robert R. Evans | | Date of Receipt |
| | Mailing Address PO Box 52 | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Pikeville | TN | 37367 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.22434 |
| Name of Employer SETHRA | | Occupation Executive Director | Amount of Each Receipt this Period |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | <input type="text"/> 100.00 |
| | | <input type="text"/> 600.00 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | | |
|---|---|----------------------------------|--|
| B. | Full Name (Last, First, Middle Initial) Dennis Gregg | | Date of Receipt |
| | Mailing Address 185 Hood Drive | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 7 / 2 0 0 8 |
| | City | State | Zip Code |
| | Crossville | TN | 38555 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.22459 |
| Name of Employer Obed Watershed Community Assoc | | Occupation Executive Director | Amount of Each Receipt this Period |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | <input type="text"/> 250.00 |
| | | <input type="text"/> 250.00 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | | |
|---|---|-----------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Robert E. Harrison | | Date of Receipt |
| | Mailing Address PO Box 1400 | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Crossville | TN | 38557 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.22420 |
| Name of Employer Plateau Properties, Inc. | | Occupation Real Estate | Amount of Each Receipt this Period |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | <input type="text"/> 100.00 |
| | | <input type="text"/> 350.00 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | |
|--|--------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 450.00 |
| TOTAL 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 11 / 64 |
| | <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)
Lincoln Davis for Congress

| | | | |
|--|---|--------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Ronald D. Higgs | | Date of Receipt |
| | Mailing Address 158 Coffey Circle | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Rockwood | TN | 37854 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.22457 |
| Name of Employer Self | | Occupation | Amount of Each Receipt this Period |
| Self | | Physician | <input type="text"/> 500.00 |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text"/> 500.00 | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|---|--------------------------|--|
| B. | Full Name (Last, First, Middle Initial) William B. Killian | | Date of Receipt |
| | Mailing Address Number One Oak Ave | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Jasper | TN | 37347 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.22411 |
| Name of Employer Self | | Occupation | Amount of Each Receipt this Period |
| Self | | Attorney | <input type="text"/> 400.00 |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text"/> 500.00 | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|---|--------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Christopher Kincade | | Date of Receipt |
| | Mailing Address 2514 Sharondale Dr | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Nashville | TN | 37215 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.22397 |
| Name of Employer Info Requested | | Occupation | Amount of Each Receipt this Period |
| Info Requested | | Info Req | <input type="text"/> 250.00 |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text"/> 250.00 | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 1150.00 |
| TOTAL 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 12 / 64 |
| | <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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
H. Grant Law, Jr.

Mailing Address PO Box 1367

City State Zip Code
Chattanooga TN 37401

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

Name of Employer Self Occupation Auto Dealer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.22338

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Jane R Long

Mailing Address 112 Peirce Street

City State Zip Code
Rockwood TN 37854

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

Name of Employer Roane Realty Occupation Real Estate Agent

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.22466

Amount of Each Receipt this Period
250.00

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

C.

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

Mailing Address PO Box 1250

City State Zip Code
Crossville TN 38557

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

Name of Employer Self Occupation Attorney at Law

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.22469

Amount of Each Receipt this Period
500.00

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 13 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
John E. McDowell

Mailing Address 10 Cadillac Drive

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
Weaver Barksdale & Associates President & CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
11 / 07 / 2008

Transaction ID: SA11AI.22473

Amount of Each Receipt this Period
800.00

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

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

Mailing Address 1 Union Square Suite 604

City State Zip Code
Chattanooga TN 37402

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

Name of Employer Occupation
Self Investments

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 27 / 2008

Transaction ID: SA11AI.22298

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 404 James Robertson pkwy

City State Zip Code
Nashville TN 37219

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

Name of Employer Occupation
Self Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 31 / 2008

Transaction ID: SA11AI.22406

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2050.00**

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 14 / 64 |
| | <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)
Lincoln Davis for Congress

| | | | |
|---|---|------------------------------|--|
| A. | Full Name (Last, First, Middle Initial) Anna Belle O'Brien | | Date of Receipt |
| | Mailing Address 8351 Cherokee Trail | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Crossville | TN | 38555 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.22441 |
| Name of Employer Retired | | Occupation State Senator | Amount of Each Receipt this Period |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | <input type="text"/> 500.00 |
| | | <input type="text"/> 2800.00 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | | |
|---|---|-----------------------------|--|
| B. | Full Name (Last, First, Middle Initial) Stephen Oppenheimer | | Date of Receipt |
| | Mailing Address 5334 Long Island Drive | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Atlanta | GA | 30327 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.22446 |
| Name of Employer Retired | | Occupation Dentist | Amount of Each Receipt this Period |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | <input type="text"/> 250.00 |
| | | <input type="text"/> 250.00 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | | |
|---|---|------------------------------|--|
| C. | Full Name (Last, First, Middle Initial) James H Shumock | | Date of Receipt |
| | Mailing Address 8850 North Ct | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 1 / 2 0 0 8 |
| | City | State | Zip Code |
| | Spanish Fort | AL | 36527 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.22339 |
| Name of Employer Thompson Engineering | | Occupation President | Amount of Each Receipt this Period |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | <input type="text"/> 1000.00 |
| | | <input type="text"/> 1000.00 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | |
|--|---------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 1750.00 |
| TOTAL 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: PAGE 15 / 64
(check only one)

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

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey A. Sikes

Mailing Address 25 Cherokee Blvd
Suite E

City State Zip Code
Chattanooga TN 37405

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

Name of Employer Occupation
Thompson Engineering Regional Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.22396

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Robert H. Siskin

Mailing Address 36 S. Crest Road

City State Zip Code
Chattanooga TN 37404

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

Name of Employer Occupation
R.H. Siskin & Assoc Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.22495

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Reece Smith, III

Mailing Address 2033 Richard Jones Rd

City State Zip Code
Nashville TN 37214

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

Name of Employer Occupation
Haury & Smith Developer/Contractor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.22286

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 16 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
Pam Stout

Mailing Address Jamestown Hwy N.

City State Zip Code
Crossville TN 38555

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

Name of Employer Occupation
Unemployed Housewife

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.22447

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Carol H. Swafford

Mailing Address Route 2 Box 311-A

City State Zip Code
Pikeville TN 37367

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

Name of Employer Occupation
Info Requested Info Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.22433

Amount of Each Receipt this Period
250.00

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

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

Mailing Address PO Box 198062

City State Zip Code
Nashville TN 37219

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

Name of Employer Occupation
Self Attorney at Law

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.22444

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
Stanley C Thrasher

Mailing Address 104 Rob Roy Court

City Franklin State TN Zip Code 37064

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

Name of Employer Info Requested Occupation Info Req

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 31 / 2008
Transaction ID: SA11AI.22404
 Amount of Each Receipt this Period: 500.00

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

B. Full Name (Last, First, Middle Initial)
Lewis 'Matt' Turner

Mailing Address 28 Kittyann Drive

City Crossville State TN Zip Code 38555

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

Name of Employer Turner Roofing Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 10 / 31 / 2008
Transaction ID: SA11AI.22442
 Amount of Each Receipt this Period: 250.00

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

C. Full Name (Last, First, Middle Initial)
Michael A. Walker

Mailing Address PO Box 1780

City Jamestown State TN Zip Code 38556

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

Name of Employer Self Occupation Attorney at Law

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 10 / 31 / 2008
Transaction ID: SA11AI.22341
 Amount of Each Receipt this Period: 1000.00

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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | PAGE 18 / 64 |
|---|--|--------------|

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

| | | | |
|---|---|-----------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Mr. Fay Wheeler | | Date of Receipt MM / DD / YYYY 10 / 31 / 2008 |
| | Mailing Address 1637 Cherokee Road E. | | Transaction ID: SA11AI.22394 |
| | City Crossville, | State TN | Zip Code 38555 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| | Name of Employer Stonehsaus Winery | Occupation Consultant/Director | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | | |

| | | | |
|---|---|------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Dick Williams | | Date of Receipt MM / DD / YYYY 10 / 31 / 2008 |
| | Mailing Address 9000 Legens Lane | | Transaction ID: SA11AI.22418 |
| | City Knoxville | State TN | Zip Code 37922 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| | Name of Employer The Plateau Group Inc | Occupation Financial Consultant | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | | |

| | | | |
|---|---|------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Les Winningham | | Date of Receipt MM / DD / YYYY 10 / 30 / 2008 |
| | Mailing Address PO Box 188 | | Transaction ID: SA11AI.22327 |
| | City Huntsville | State TN | Zip Code 37756 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| | Name of Employer State of Tennessee | Occupation Representative | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | | |

| | | |
|--|---|---------|
| 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 19 / 64 | |
| | (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)
Lincoln Davis for Congress

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--------------------------|---|---|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Charles Womack | | Date of Receipt | | | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 859 Loweland Road | | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 3 | 0 | | 2 | 0 | 0 | 8 |
| | M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| | 1 | 0 | | 3 | 0 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | | |
| | City | State | Zip Code | | Transaction ID: SA11AI.22326 | | | | | | | | | | | | | | | | | | | |
| | Cookeville | TN | 38501 | | | | | | | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | | C | | Amount of Each Receipt this Period | | | | | | | | | | | | | | | | | | | | |
| | | | | 1000.00 | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Self | | Occupation Physician | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ | | | | | | | | | | | | | | | | | | | | | | |
| | | 1000.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 19726.65 |

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 / 64 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Lincoln Davis for Congress

| | | | |
|---|---|-------------|---|
| A. | Full Name (Last, First, Middle Initial) ACFAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE | | Date of Receipt MM / DD / YYYY 10 / 25 / 2008 |
| | Mailing Address 4040 W. 70th St | | Transaction ID: SA11C.22277 |
| | City Minneapolis | State MN | Zip Code 55435 |
| | FEC ID number of contributing federal political committee. C C00034785 | | Amount of Each Receipt this Period 1000.00 |
| | Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 3500.00 | | |

| | | | |
|---|---|-------------|---|
| B. | Full Name (Last, First, Middle Initial) ACTION COMMITTEE FOR RURAL ELECTRIFICATION NATIONAL RURAL ELECTRIC COOPERATIVE | | Date of Receipt MM / DD / YYYY 10 / 30 / 2008 |
| | Mailing Address 4301 Wilson Boulevard | | Transaction ID: SA11C.22319 |
| | City Arlington | State VA | Zip Code 22203 |
| | FEC ID number of contributing federal political committee. C C00002972 | | Amount of Each Receipt this Period 3000.00 |
| | Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 9702.60 | | |

| | | | |
|---|---|-------------|---|
| C. | Full Name (Last, First, Middle Initial) American Fedeaion of State County & Municipal Employees - P E O P L E, Qualified | | Date of Receipt MM / DD / YYYY 11 / 24 / 2008 |
| | Mailing Address 1625 L Street NW | | Transaction ID: SA11C.22487 |
| | City Washington | State DC | Zip Code 20036 |
| | FEC ID number of contributing federal political committee. C C00011114 | | Amount of Each Receipt this Period 1000.00 |
| | Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 5000.00 |
| 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 / 64 |
| | (check only one) |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input checked="" 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 | |

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)
Lincoln Davis for Congress

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| A. | Full Name (Last, First, Middle Initial) AMERICAN OSTEOPATHIC INFORMATION ASSOCIATION - OSTEOPATHIC POLITICAL ACTION COMMITTEE | | Date of Receipt | | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 1090 Vermont Ave. NW Suite 510 | | <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | / | 0 | 7 | / | 2 | 0 | 0 | 8 |
| | M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| | 1 | 1 | / | 0 | 7 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| | City State Zip Code Washington DC 20005 | | Transaction ID: SA11C.22476 | | | | | | | | | | | | | | | | | | | | |
| | FEC ID number of contributing federal political committee. C C00113803 | | Amount of Each Receipt this Period 1000.00 | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | | | | | | | | | | | | | | | | | | | | | |

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|---|---|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. | Full Name (Last, First, Middle Initial) Asbestos Workers PAC Local 46 | | Date of Receipt | | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 9602 M.L. King Hwy | | <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | / | 3 | 1 | / | 2 | 0 | 0 | 8 |
| | M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| | 1 | 0 | / | 3 | 1 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| | City State Zip Code Lanham MD 20706 | | Transaction ID: SA11C.22343 | | | | | | | | | | | | | | | | | | | | |
| | FEC ID number of contributing federal political committee. C C00115527 | | Amount of Each Receipt this Period 1000.00 | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | | | | | | | | | | | | | | | | | | | | | |

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|---|--|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. | Full Name (Last, First, Middle Initial) CAPELLA HEALTHCARE, INC. GOVERNMENT AFFAIRS COMMITTEE | | Date of Receipt | | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 501 CORPORATE CENTRE DRIVE STE 200 | | <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | / | 2 | 5 | / | 2 | 0 | 0 | 8 |
| | M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| | 1 | 0 | / | 2 | 5 | / | 2 | 0 | 0 | 8 | | | | | | | | | | | | | |
| | City State Zip Code FRANKLIN TN 37067 | | Transaction ID: SA11C.22280 | | | | | | | | | | | | | | | | | | | | |
| | FEC ID number of contributing federal political committee. C C00421420 | | Amount of Each Receipt this Period 1000.00 | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Occupation | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | | | | | | | | | | | | | | | | | | | | | |
| Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | | | | | | | | | | | | | | | | | | | | | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3000.00 |
| 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 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
Carpenter's Legislative Improvement Committee

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 11 / 24 / 2008
Transaction ID: SA11C.22490
 Amount of Each Receipt this Period 2500.00

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

B. Full Name (Last, First, Middle Initial)
CHICAGO BOARD OF OPTIONS EXCHANGE INC PAC

Mailing Address 400 S. LaSalle Street

City Chicago State IL Zip Code 60605

FEC ID number of contributing federal political committee. **C** C00100693

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 11 / 07 / 2008
Transaction ID: SA11C.22481
 Amount of Each Receipt this Period 2000.00

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

C. Full Name (Last, First, Middle Initial)
DAIRY FARMERS OF AMERICA INC DEPAC (DAIRY EDUCATION POLITICAL ACTION COMMITTEE)

Mailing Address 10220 N. Executive Hills Blvd

City KANSAS CITY State MO Zip Code 65153

FEC ID number of contributing federal political committee. **C** C00001388

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 11 / 07 / 2008
Transaction ID: SA11C.22483
 Amount of Each Receipt this Period 2000.00

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

SUBTOTAL of Receipts This Page (optional) ► 6500.00

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 / 64

(check only one)

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

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOBILE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City State Zip Code
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 27 / 2008

Transaction ID: SA11C.22300

Amount of Each Receipt this Period
5000.00

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

B.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee - Contributions

Mailing Address 430 South Capitol Street SE
2nd Floor

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00347864

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
27.20

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 16 / 2008

Transaction ID: SA11C.22356

Amount of Each Receipt this Period
27.20

In-kind - RRI Breakfast

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

C.

Full Name (Last, First, Middle Initial)
DRIVE - DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION - PAC FOR INT'L BROTHERHOOD

Mailing Address 25 Louisiana Ave. NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 25 / 2008

Transaction ID: SA11C.22275

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional)

10027.20

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 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
ELI LILLY AND COMPANY

Mailing Address LILLY COPORATE CENTER

City State Zip Code
INDIANAPOLIS IN 46285

FEC ID number of contributing federal political committee. **C** C70003629

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11C.22317

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
HCA INC. GOOD GOVERNMENT FUND

Mailing Address PO BOX 550
ONE PARK PLAZA

City State Zip Code
NASHVILLE TN 37203

FEC ID number of contributing federal political committee. **C** C00067231

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11C.22301

Amount of Each Receipt this Period
2500.00

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

C. Full Name (Last, First, Middle Initial)
HSBC NORTH AMERICA POLITICAL ACTION COMMITTEE (H-PAC)

Mailing Address 2700 Sanders Road

City State Zip Code
Prospect Heights IL 60070

FEC ID number of contributing federal political committee. **C** C00033423

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 7 / 2 0 0 8

Transaction ID: SA11C.22478

Amount of Each Receipt this Period
1500.00

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

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL CHEMICAL WORKERS UNION LABOR'S INVESTMENT IN VOTER EDUCATION

Mailing Address 1799 AKRON PENINSULA ROAD

City AKRON State OH Zip Code 44313

FEC ID number of contributing federal political committee. **C** C00005835

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 11 / 07 / 2008
Transaction ID: SA11C.22471
 Amount of Each Receipt this Period: 500.00

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

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE

Mailing Address 1101 Pennsylvania Avenue NW Suite 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: SA11C.22318
 Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
Laborers' Political League-Laborers' International Union of NA

Mailing Address 905 16th Street NW Second Floor

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: 10 / 20 / 2008
Transaction ID: SA11C.22385
 Amount of Each Receipt this Period: 2500.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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 26 / 64 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <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)
Lincoln Davis for Congress

| | | | |
|--|---|--------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND | | Date of Receipt |
| | Mailing Address 103 POWELL COURT SUITE 200 | | <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | BRENTWOOD | TN | 37027 |
| | FEC ID number of contributing federal political committee. | | Transaction ID: SA11C.22345 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | <input type="text" value="2500.00"/> |
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| <input type="checkbox"/> Other (specify) ▼ | | <input type="text" value="2500.00"/> | |

| | | | |
|--|---|--------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) MANUFACTURED HOUSING INSTITUTE PAC | | Date of Receipt |
| | Mailing Address 2101 WILSON BLVD. SUITE 610 | | <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | ARLINGTON | VA | 22201 |
| | FEC ID number of contributing federal political committee. | | Transaction ID: SA11C.22315 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | <input type="text" value="1000.00"/> |
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| <input type="checkbox"/> Other (specify) ▼ | | <input type="text" value="1000.00"/> | |

| | | | |
|--|--|--------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) MCKESSON CORPORATION EMPLOYEES POLITICAL FUND | | Date of Receipt |
| | Mailing Address ONE POST STREET 29TH FLOOR | | <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/> |
| | City | State | Zip Code |
| | SAN FRANCISCO | CA | 94104 |
| | FEC ID number of contributing federal political committee. | | Transaction ID: SA11C.22313 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: 2008 | | Election Cycle-to-Date ▼ | <input type="text" value="1000.00"/> |
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| <input type="checkbox"/> Other (specify) ▼ | | <input type="text" value="4000.00"/> | |

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| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="4500.00"/> |
| TOTAL 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: PAGE 27 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND
 Mailing Address ONE POST STREET 29TH FLOOR
 City State Zip Code
 SAN FRANCISCO CA 94104
 FEC ID number of contributing federal political committee. **C** C00108035
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 7000.00
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 8
Transaction ID: SA11C.22320
 Amount of Each Receipt this Period
 3000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE
 Mailing Address 1919 Pennsylvania Ave NW
 8th Floor
 City State Zip Code
 Washington DC 20006
 FEC ID number of contributing federal political committee. **C** C00004812
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 7 / 2 0 0 8
Transaction ID: SA11C.22480
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS TELEVISION AND RADIO POLITICAL ACTION COMMITTEE
 Mailing Address 1771 N STREET NW
 City State Zip Code
 WASHINGTON DC 20036
 FEC ID number of contributing federal political committee. **C** C00009985
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 5000.00
 Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 0 / 2 0 0 8
Transaction ID: SA11C.22386
 Amount of Each Receipt this Period
 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 64
(check only one)

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

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMMITTEE

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11C.22387

Amount of Each Receipt this Period: 2500.00

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

B. Full Name (Last, First, Middle Initial)
NATIONAL LUMBER AND BUILDING MATERIAL DEALERS ASSN POLITICAL ACTION COMMITTEE (LUMBAO)

Mailing Address 2025 M Street NW Suite 800

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00039214

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11C.22346

Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

Mailing Address 1201 16th St NW Ste 420

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11C.22388

Amount of Each Receipt this Period: 3000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **6500.00**

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 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION
Mailing Address 1201 16th St NW Ste 420
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00003251
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 10 / 30 / 2008
Transaction ID: SA11C.22312
Amount of Each Receipt this Period 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
PFIZER INC. PAC
Mailing Address 235 EAST 42ND STREET
City NEW YORK State NY Zip Code 10017
FEC ID number of contributing federal political committee. **C** C00016683
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 11 / 07 / 2008
Transaction ID: SA11C.22477
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
PUBLIX SUPER MARKETS, INC. ASSOCIATES POLITICAL ACTION COMMITTEE
Mailing Address Po Box 407
City Lakeland State FL Zip Code 33802
FEC ID number of contributing federal political committee. **C** C00400705
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 10 / 20 / 2008
Transaction ID: SA11C.22382
Amount of Each Receipt this Period 500.00
 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 30 / 64
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
SECURITIES INDUSTRY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1425 K Street NW
7th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00067504

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
11 / 24 / 2008

Transaction ID: SA11C.22486

Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
SMITHKLINE BEECHAM CORP. PAC (GLAXOSMITHKLINE PAC)

Mailing Address Five Moore Drive P.O. Box 13358
P.O. Box 13358

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
10 / 27 / 2008

Transaction ID: SA11C.22303

Amount of Each Receipt this Period 500.00

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

C. Full Name (Last, First, Middle Initial)
SYNGENTA CORPORATION EMPLOYEE POLITICAL ACTION COMMITTEE (SYNGENTA PAC)

Mailing Address 1399 NEW YORK AVENUE NW
SUITE 750

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00363945

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
11 / 07 / 2008

Transaction ID: SA11C.22488

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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 / 64
(check only one)

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

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A. Full Name (Last, First, Middle Initial)
TIMKEN COMPANY GOOD GOVERNMENT FUND, THE

Mailing Address 1835 Dueber Avenue S.W.

City State Zip Code
Canton OH 44706

FEC ID number of contributing federal political committee. **C** C00311308

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11C.22296

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13th St. NW
Suite 340

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11C.22384

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE

Mailing Address 901 MASSACHUSETTS AVENUE, NW

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 0 8

Transaction ID: SA11C.22279

Amount of Each Receipt this Period
5000.00

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

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

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 / 64
(check only one)

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

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8th Street

City Bentonville State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2008

Transaction ID: SA11C.22479

Amount of Each Receipt this Period
1000.00

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) | ▶ | 65027.20 |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 33 / 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Lincoln Davis for Congress

| | | | |
|-----------|---|--|---|
| A. | Full Name (Last, First, Middle Initial) Benenson Strategy Mailing Address 1000 Potomac Street NW City Washington State DC Zip Code 20007 Purpose of Disbursement Tracking Survey Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22512 Date of Disbursement 10 / 16 / 2008 | Amount of Each Disbursement this Period 10600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) Bledsonian Banner Mailing Address 108 Spring Street City Pikeville State TN Zip Code 37367 Purpose of Disbursement Newspaper Ads Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22503 Date of Disbursement 10 / 16 / 2008 | Amount of Each Disbursement this Period 229.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Jon Boughton Mailing Address 623 Broadway Ave City Nashville State TN Zip Code 37203 Purpose of Disbursement Reimb Travel Expense Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22502 Date of Disbursement 10 / 16 / 2008 | Amount of Each Disbursement this Period 3790.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) | 14620.08 |
| 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)
Lincoln Davis for Congress

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) Jon Boughton Mailing Address 623 Broadway Ave City Nashville State TN Zip Code 37203 Purpose of Disbursement November Wages Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22544 Date of Disbursement 10 / 31 / 2008 Amount of Each Disbursement this Period 3866.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) C2 Group LLC Mailing Address 101 Constitution Ave NW Suite 900 City Washington State DC Zip Code 20001 Purpose of Disbursement In-kind - Fundraising Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22500 Date of Disbursement 10 / 16 / 2008 Amount of Each Disbursement this Period 1326.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Davey Consulting LLC Mailing Address 236 Massachusetts Ave NE #508 City Washington State DC Zip Code 20002 Purpose of Disbursement Fundraising Expense Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22574 Date of Disbursement 10 / 29 / 2008 Amount of Each Disbursement this Period 4124.89 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

SUBTOTAL of Disbursements This Page (optional) ▶

9318.04

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)

PAGE 35 / 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Lincoln Davis for Congress

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee - Contributions Mailing Address 430 South Capitol Street SE 2nd Floor City Washington State DC Zip Code 20003 Purpose of Disbursement In-kind - RRI Breakfast Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22357 Date of Disbursement 10 / 16 / 2008 |
| | Amount of Each Disbursement this Period 27.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
|--|---|
| B. Full Name (Last, First, Middle Initial) Excel Telecommunications Mailing Address PO Box 650582 City Dallas State TX Zip Code 75262 Purpose of Disbursement Long Distance Service Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22543 Date of Disbursement 10 / 31 / 2008 |
| | Amount of Each Disbursement this Period 20.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) Fletcher & Rowley Mailing Address 818 18th Avenue So City Nashville State TN Zip Code 37203 Purpose of Disbursement Media Buy Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22560 Date of Disbursement 10 / 22 / 2008 |
| | Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2547.20 |
| TOTAL 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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Fletcher & Rowley

Mailing Address 818 18th Avenue So

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Radio Buy

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

Transaction ID: SB17.22575
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

20000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Fletcher & Rowley

Mailing Address 818 18th Avenue So

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Radio Buy

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

Transaction ID: SB17.22532
Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

7289.39

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Fletcher & Rowley

Mailing Address 818 18th Avenue So

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Media

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

Transaction ID: SB17.22559
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

762.12

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

28051.51

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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Lawrence County Advocate

Transaction ID: SB17.22549
Date of Disbursement

Mailing Address 121 Military Ave

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 7 | | 2 | 0 | 0 | 8 |

City State Zip Code
Lawrenceburg TN 38464

Amount of Each Disbursement this Period

| |
|--------|
| 226.80 |
|--------|

Purpose of Disbursement
Newspaper Ad

004
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

B.

Full Name (Last, First, Middle Initial)
Saturday Independent

Transaction ID: SB17.22550
Date of Disbursement

Mailing Address 102 E. High Street

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 7 | | 2 | 0 | 0 | 8 |

City State Zip Code
Manchester TN 37355

Amount of Each Disbursement this Period

| |
|--------|
| 294.00 |
|--------|

Purpose of Disbursement
Newspaper Ad

004
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

C.

Full Name (Last, First, Middle Initial)
Southern Standard

Transaction ID: SB17.22546
Date of Disbursement

Mailing Address 105 College Street

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

City State Zip Code
McMinnville TN 37110

Amount of Each Disbursement this Period

| |
|--------|
| 298.10 |
|--------|

Purpose of Disbursement
Newspaper Ads

004
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|--------|
| 818.90 |
|--------|

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)
Lincoln Davis for Congress

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) The Expositor</p> <p>Mailing Address 34 W. Bockman Way</p> <p>City Sparta State TN Zip Code 38583</p> <p>Purpose of Disbursement Hunting Guide Ad</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22547</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 99.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B. Full Name (Last, First, Middle Initial) The Good Ole Boys Band</p> <p>Mailing Address PO Box 243</p> <p>City Monteagle State TN Zip Code 37356</p> <p>Purpose of Disbursement Entertainment for Event</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22508</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 600.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C. Full Name (Last, First, Middle Initial) TN Press Service</p> <p>Mailing Address 435 Montbrook Lane</p> <p>City Knoxville State TN Zip Code 37909</p> <p>Purpose of Disbursement Newspaper Ads</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22552</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 9462.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

10162.55

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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
US Post Office

Mailing Address 2278 Hwy 41S

City Nashville State TN Zip Code 37201

Purpose of Disbursement
Postage Stamps

003
Category/
Type

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

Transaction ID: SB17.22521
Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

420.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO Box 105378

City Atlanta State GA Zip Code 30348

Purpose of Disbursement
Telephone Service

001
Category/
Type

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

Transaction ID: SB17.22511
Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

263.58

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO Box 105378

City Atlanta State GA Zip Code 30348

Purpose of Disbursement
Telephone Service

001
Category/
Type

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

Transaction ID: SB17.22548
Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

155.65

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

839.23

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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO Box 105378

City Atlanta State GA Zip Code 30348

Purpose of Disbursement
Telephone Service

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

001
Category/
Type

Transaction ID: SB17.22542
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

189.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
VISA

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement
Travel Expense

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

002
Category/
Type

Transaction ID: SB17.22529
Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

5775.74

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address 2800 Opryland Drive

City Nashville State TN Zip Code 37206

Purpose of Disbursement
Gasoline

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

002
Category/
Type

Transaction ID: SB17.22529.4
Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

59.01

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

5965.40

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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address 1160 Livingston Hwy

City Byrdstown State TN Zip Code 38549

Purpose of Disbursement
Gasoline

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17.22529.7
Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

64.04

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address 1160 Livingston Hwy

City Byrdstown State TN Zip Code 38549

Purpose of Disbursement
Gasoline

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17.22529.8
Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

57.45

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Wolf Camera #1618

Mailing Address 3404 West End Ave

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Camera Equipment

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17.22529.9
Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 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)
Lincoln Davis for Congress

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) US Post Office Mailing Address 2278 Hwy 41S City Nashville State TN Zip Code 37201 Purpose of Disbursement Postage Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.10 Date of Disbursement 10 / 21 / 2008 Amount of Each Disbursement this Period 16.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| B. | Full Name (Last, First, Middle Initial) Murphy USA Mailing Address Hwy 127 South City Crossville State TN Zip Code 38555 Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.12 Date of Disbursement 10 / 21 / 2008 Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| C. | Full Name (Last, First, Middle Initial) Ben Lomand Communications Mailing Address 311 N. Chancery Street City McMinnville State TN Zip Code 37110 Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.13 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 420.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL 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 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)
Lincoln Davis for Congress

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Wal-Mart</p> <p>Mailing Address 915 N Chancery Street</p> <p>City McMinnville State TN Zip Code 37110</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22529.14</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <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="80.23"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
| <p>B. Full Name (Last, First, Middle Initial) PF Changes</p> <p>Mailing Address 439 Cool Springs Blvd</p> <p>City Franklin State TN Zip Code 37067</p> <p>Purpose of Disbursement Luncheon</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22529.16</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <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="65.99"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
| <p>C. Full Name (Last, First, Middle Initial) Exxon Mobile 75</p> <p>Mailing Address North Main Street</p> <p>City Crossville State TN Zip Code 38555</p> <p>Purpose of Disbursement Gasoline</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22529.20</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <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="79.04"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |

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 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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Prater's BBQ

Mailing Address 9915 Manchester Hwy

City Manchester State TN Zip Code 37110

Purpose of Disbursement
Lunch

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

002
Category/
Type

Transaction ID: SB17.22529.21
Date of Disbursement

10 / 19 / 2008

Amount of Each Disbursement this Period

55.18

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Kinko's

Mailing Address 2308 W. End Avenue

City Nashville State TN Zip Code 37242

Purpose of Disbursement
Printing

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

003
Category/
Type

Transaction ID: SB17.22529.22
Date of Disbursement

10 / 19 / 2008

Amount of Each Disbursement this Period

306.38

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Wal-Mart of Smyrna

Mailing Address 570 Enon Springs Road

City Smyrna State TN Zip Code 37167

Purpose of Disbursement
Film Developing

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

003
Category/
Type

Transaction ID: SB17.22529.23
Date of Disbursement

10 / 19 / 2008

Amount of Each Disbursement this Period

74.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

PAGE 45 / 64

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Lincoln Davis for Congress

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Shell Oil Mailing Address 361 Harding Road City Antioch State TN Zip Code 37211 Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.24 Date of Disbursement 10 / 19 / 2008 Amount of Each Disbursement this Period 76.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| B. | Full Name (Last, First, Middle Initial) Shell Oil Mailing Address 1160 Livingston Hwy City Byrdstown State TN Zip Code 38549 Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.25 Date of Disbursement 10 / 18 / 2008 Amount of Each Disbursement this Period 49.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| C. | Full Name (Last, First, Middle Initial) Lowe's Mailing Address Hwy 127 North City Crossville State TN Zip Code 38555 Purpose of Disbursement T-Posts and Ties Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.29 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 146.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | 0.00 |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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|--|------------------------------|------------------------------|------------------------------|
| <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)
Lincoln Davis for Congress

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Murphy USA Mailing Address Hwy 127 South City Crossville State TN Zip Code 38555 Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.30 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 60.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| B. | Full Name (Last, First, Middle Initial) Shell Oil Mailing Address 1160 Livingston Hwy City Byrdstown State TN Zip Code 38549 Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.32 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 39.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| C. | Full Name (Last, First, Middle Initial) Exxon Mobile Mailing Address 5965 Cool Springs Blvd City Franklin State TN Zip Code 37067 Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.33 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 55.14 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | 0.00 |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Murphy USA

Mailing Address Hwy 127 South

City Crossville State TN Zip Code 38555

Purpose of Disbursement
Gasoline

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17.22529.35
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 6 | | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

| |
|-------|
| 80.68 |
|-------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Noshville Delicatessent

Mailing Address 4014 Hillsboro

City Nashville State TN Zip Code 37215

Purpose of Disbursement
Lunch

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17.22529.36
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 6 | | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

| |
|-------|
| 35.19 |
|-------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Best Western Hotels

Mailing Address 1308 Murfreesboro Rd

City Franklin State TN Zip Code 37064

Purpose of Disbursement
Lodging

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17.22529.37
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 6 | | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

| |
|-------|
| 87.20 |
|-------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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|------|
| 0.00 |
|------|

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)

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| <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)
Lincoln Davis for Congress

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Best Western Hotels</p> <p>Mailing Address 1308 Murfreesboro Rd</p> <p>City Franklin State TN Zip Code 37064</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22529.38 Date of Disbursement: 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 87.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p> |
| <p>B. Full Name (Last, First, Middle Initial) Cracker Barrel</p> <p>Mailing Address 3128 N Main Street</p> <p>City Crossville State TN Zip Code 38555</p> <p>Purpose of Disbursement Lunch</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22529.39 Date of Disbursement: 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 46.71</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p> |
| <p>C. Full Name (Last, First, Middle Initial) Shell Oil</p> <p>Mailing Address 361 Harding Road</p> <p>City Antioch State TN Zip Code 37211</p> <p>Purpose of Disbursement Gasoline</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22529.40 Date of Disbursement: 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 63.07</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address 889 S. Jefferson Ave

City Cookeville State TN Zip Code 38501

Purpose of Disbursement
Gasoline

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17.22529.41
Date of Disbursement

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

Amount of Each Disbursement this Period

| |
|-------|
| 65.33 |
|-------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Best Western Hotels

Mailing Address 1308 Murfreesboro Rd

City Franklin State TN Zip Code 37064

Purpose of Disbursement
Lodging

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17.22529.42
Date of Disbursement

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

Amount of Each Disbursement this Period

| |
|--------|
| 148.37 |
|--------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Best Western Hotels

Mailing Address 1308 Murfreesboro Rd

City Franklin State TN Zip Code 37064

Purpose of Disbursement
Lodging

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB17.22529.43
Date of Disbursement

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

Amount of Each Disbursement this Period

| |
|--------|
| 148.37 |
|--------|

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 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)
Lincoln Davis for Congress

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Lowe's | Transaction ID: SB17.22529.46 Date of Disbursement 10 / 16 / 2008 |
| | Mailing Address Hwy 127 North | Amount of Each Disbursement this Period 308.28 |
| | City Crossville State TN Zip Code 38555 | Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| | Purpose of Disbursement T-Posts and Ties Candidate Name LINCOLN DAVIS Category/Type 004 | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|--|
| B. | Full Name (Last, First, Middle Initial) Kinko's | Transaction ID: SB17.22529.47 Date of Disbursement 10 / 16 / 2008 |
| | Mailing Address 2308 W. End Avenue | Amount of Each Disbursement this Period 148.82 |
| | City Nashville State TN Zip Code 37242 | Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| | Purpose of Disbursement Printing Candidate Name LINCOLN DAVIS Category/Type 003 | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|--|
| C. | Full Name (Last, First, Middle Initial) Palm Restaurant | Transaction ID: SB17.22529.49 Date of Disbursement 10 / 16 / 2008 |
| | Mailing Address 1225 19th Street NW | Amount of Each Disbursement this Period 177.19 |
| | City Washington State DC Zip Code 20036 | Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| | Purpose of Disbursement Luncheon Candidate Name LINCOLN DAVIS Category/Type 003 | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| 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)
Lincoln Davis for Congress

| | | | |
|----|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Kinko's Mailing Address 2308 W. End Avenue City Nashville State TN Zip Code 37242 Purpose of Disbursement Printing Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.50 Date of Disbursement 10 / 16 / 2008 | Amount of Each Disbursement this Period 121.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| B. | Full Name (Last, First, Middle Initial) Best Western Smoke House Mailing Address Hwy 111 City Monteagle State TN Zip Code 37356 Purpose of Disbursement Luncheon Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22529.51 Date of Disbursement 10 / 18 / 2008 | Amount of Each Disbursement this Period 309.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| C. | Full Name (Last, First, Middle Initial) VISA Mailing Address PO Box 30131 City Tampa State FL Zip Code 33630 Purpose of Disbursement Travel Expense Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22531 Date of Disbursement 11 / 07 / 2008 | Amount of Each Disbursement this Period 3737.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

SUBTOTAL of Disbursements This Page (optional) ▶

3737.13

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)
Lincoln Davis for Congress

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) Shell Oil</p> <p>Mailing Address 2800 Opryland Drive</p> <p>City Nashville State TN Zip Code 37206</p> <p>Purpose of Disbursement Gasoline</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22531.0</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 50.74</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
| <p>B. Full Name (Last, First, Middle Initial) National Democratic Club</p> <p>Mailing Address 30 Ivy Street</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22531.1</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 53.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
| <p>C. Full Name (Last, First, Middle Initial) EMMA</p> <p>Mailing Address 1910 21st Avenue S</p> <p>City Nashville State TN Zip Code 37212</p> <p>Purpose of Disbursement</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22531.2</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |

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| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| 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 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)
Lincoln Davis for Congress

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) Symantec</p> <p>Mailing Address 20330 Stevens Creek Blvd</p> <p>City Cupertino State CA Zip Code 95014</p> <p>Purpose of Disbursement Antivirus Renewal</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22531.3</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="43.79"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
| <p>B. Full Name (Last, First, Middle Initial) NGP Software</p> <p>Mailing Address 5520 Connecticut Ave NW Suite 203</p> <p>City Washington State DC Zip Code 20015</p> <p>Purpose of Disbursement Software</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22531.4</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1650.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
| <p>C. Full Name (Last, First, Middle Initial) Shell Oil</p> <p>Mailing Address 2800 Opryland Drive</p> <p>City Nashville State TN Zip Code 37206</p> <p>Purpose of Disbursement Gasoline</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22531.5</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="33.88"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |

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 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)
Lincoln Davis for Congress

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Shell Oil</p> <p>Mailing Address 1160 Livingston Hwy</p> <p>City Byrdstown State TN Zip Code 38549</p> <p>Purpose of Disbursement Gasoline</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22531.7</p> <p>Date of Disbursement 11 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 55.23</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
| <p>B. Full Name (Last, First, Middle Initial) Jameson Inn</p> <p>Mailing Address 715 S James Campbell Blvd</p> <p>City Columbia State TN Zip Code 38401</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22531.9</p> <p>Date of Disbursement 10 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 308.43</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
| <p>C. Full Name (Last, First, Middle Initial) Shell Oil</p> <p>Mailing Address 361 Harding Road</p> <p>City Antioch State TN Zip Code 37211</p> <p>Purpose of Disbursement Gasoline</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.22531.10</p> <p>Date of Disbursement 10 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 43.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |

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| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| 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 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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Exxon Mobil

Mailing Address 950 s. Capital St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Gasoline

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

002
Category/
Type

Transaction ID: SB17.22531.11
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

51.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
O'Charlies Restaurant

Mailing Address 1401 Interstate Drive

City Cookeville State TN Zip Code 38501

Purpose of Disbursement
Lunch

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

002
Category/
Type

Transaction ID: SB17.22531.13
Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

78.58

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Shell Oil

Mailing Address 889 S. Jefferson Ave

City Cookeville State TN Zip Code 38501

Purpose of Disbursement
Gasoline

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

002
Category/
Type

Transaction ID: SB17.22531.14
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

59.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
Lincoln Davis for Congress

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Cracker Barrell | Transaction ID: SB17.22531.15 Date of Disbursement 10 / 28 / 2008 |
| | Mailing Address 3128 N Main Street | Amount of Each Disbursement this Period 22.24 |
| | City Crossville State TN Zip Code 38555 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Lunch Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 | [MEMO ITEM] |
| | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|---|
| B. | Full Name (Last, First, Middle Initial) Shell Oil | Transaction ID: SB17.22531.16 Date of Disbursement 10 / 28 / 2008 |
| | Mailing Address PO Box 538 | Amount of Each Disbursement this Period 55.90 |
| | City Sparta State TN Zip Code 38583 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 | [MEMO ITEM] |
| | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|---|---|
| C. | Full Name (Last, First, Middle Initial) Exxon Mobil | Transaction ID: SB17.22531.17 Date of Disbursement 10 / 28 / 2008 |
| | Mailing Address 950 s. Capital St SE | Amount of Each Disbursement this Period 55.97 |
| | City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 | [MEMO ITEM] |
| | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| 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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
O'Charles Restaurant

Mailing Address 1401 Interstate Drive

City Cookeville State TN Zip Code 38501

Purpose of Disbursement
Lunch

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

002
Category/
Type

Transaction ID: SB17.22531.18
Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

33.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO Box 105378

City Atlanta State GA Zip Code 30348

Purpose of Disbursement
Telephone Service

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

001
Category/
Type

Transaction ID: SB17.22531.20
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

555.30

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Murphy USA

Mailing Address Hwy 127 South

City Crossville State TN Zip Code 38555

Purpose of Disbursement
Gasoline

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

002
Category/
Type

Transaction ID: SB17.22531.22
Date of Disbursement

10 / 26 / 2008

Amount of Each Disbursement this Period

32.34

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
Lincoln Davis for Congress

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Holiday Inn Express <hr/> Mailing Address 7160 Chancery <hr/> City Manchester State TN Zip Code 37375 <hr/> Purpose of Disbursement Lodging Candidate Name LINCOLN DAVIS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22531.23 Date of Disbursement 10 / 27 / 2008 <hr/> Amount of Each Disbursement this Period 180.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| B. | Full Name (Last, First, Middle Initial) Justin Walling <hr/> Mailing Address PO Box 808 <hr/> City Spencer State TN Zip Code 38583 <hr/> Purpose of Disbursement Reimb Travel Expense Candidate Name LINCOLN DAVIS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22545 Date of Disbursement 10 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 469.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Williamson Herald <hr/> Mailing Address 121 2nd Avenue N <hr/> City Franklin State TN Zip Code 37064 <hr/> Purpose of Disbursement Newspaper Ads Candidate Name LINCOLN DAVIS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.22551 Date of Disbursement 10 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 447.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

SUBTOTAL of Disbursements This Page (optional) ▶

916.81

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

76976.85

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)
Lincoln Davis for Congress

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) BARROW, JOHN J</p> <p>Mailing Address PO Box 48178</p> <p>City Athens State GA Zip Code 30606</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TN District: 04</p> | <p>Transaction ID: SB21.22569</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee - Contributions</p> <p>Mailing Address 430 South Capitol Street SE 2nd Floor</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Excess Funds</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TN District: 04</p> | <p>Transaction ID: SB21.22557</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C. Full Name (Last, First, Middle Initial) Fentress Co Chamber of Commerce</p> <p>Mailing Address Hwy 52 West</p> <p>City Jamestown State TN Zip Code 38556</p> <p>Purpose of Disbursement Membership Dues</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TN District: 04</p> | <p>Transaction ID: SB21.22537</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="79.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

| | |
|---|---|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="151079.00"/></p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p><input type="text" value=""/></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 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)
Lincoln Davis for Congress

| | | | |
|----|--|--|---|
| A. | Full Name (Last, First, Middle Initial) Hickman County Democratic Mailing Address 4130 Bell Branch Road City Nunelly State TN Zip Code 37137 Purpose of Disbursement Donation Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21.22538 Date of Disbursement 10 / 17 / 2008 | Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) Mike Williams for State Senate Mailing Address Old Maynardville Pike City Maynardville State TN Zip Code 37807 Purpose of Disbursement Donation Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21.22554 Date of Disbursement 10 / 21 / 2008 | Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) MONTAGANO FOR CONGRESS INC Mailing Address PO BOX 615 City GOSHEN State IN Zip Code 46527 Purpose of Disbursement Donation Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB21.22524 Date of Disbursement 10 / 21 / 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 |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3250.00 |
| 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 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)
Lincoln Davis for Congress

| | | |
|-----------|---|--|
| A. | Full Name (Last, First, Middle Initial) Randy Camp for State Senate <hr/> Mailing Address PO Box 384 <hr/> City Alamo State TN Zip Code 38001 <hr/> Purpose of Disbursement Donation 011 Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04 | Transaction ID: SB21.22523 Date of Disbursement 10 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) Tim Tipps for State Senate <hr/> Mailing Address 107 North Maple Street <hr/> City Murfreesboro State TN Zip Code 37130 <hr/> Purpose of Disbursement Donation 011 Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04 | Transaction ID: SB21.22515 Date of Disbursement 10 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) TN Democrat Party <hr/> Mailing Address Po Box <hr/> City Nashville State TN Zip Code 37206 <hr/> Purpose of Disbursement Table Sponsor 003 Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04 | Transaction ID: SB21.22527 Date of Disbursement 10 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 12750.00 |
| 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 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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
TN Democrat Party

Transaction ID: SB21.22563
Date of Disbursement

Mailing Address Po Box

10 / 22 / 2008

City Nashville State TN Zip Code 37206

Amount of Each Disbursement this Period

10000.00

Purpose of Disbursement
Donation

012
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

B.

Full Name (Last, First, Middle Initial)
TN Democrat Party

Transaction ID: SB21.22564
Date of Disbursement

Mailing Address Po Box

10 / 29 / 2008

City Nashville State TN Zip Code 37206

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Donation

012
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

C.

Full Name (Last, First, Middle Initial)
TN Democrat Party

Transaction ID: SB21.22572
Date of Disbursement

Mailing Address Po Box

10 / 29 / 2008

City Nashville State TN Zip Code 37206

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Donation

012
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

SUBTOTAL of Disbursements This Page (optional)

20000.00

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)

PAGE 63 / 64

| | | | | | | | |
|--------------------------|-----|--------------------------|-----|--------------------------|-----|-------------------------------------|-----|
| <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)
Lincoln Davis for Congress

A.

Full Name (Last, First, Middle Initial)
Ty Cobb for State Representative

Mailing Address 111 East 6th Street

City State Zip Code
Columbia TN 38401

Purpose of Disbursement
Donation

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President
State: TN District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB21.22516
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

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

Form/Schedule: **F3A**

Transaction ID:

The six contributions in question were received and deposited by me on October 20, 2008i. However I inadvertently marked them for the 12-Day Pre-General period resulting in these contributions not being timely reported on the 48-Hour notice.

The procedure I use for soliciting personal information from contributors is by mailing to each person a blank card for them to fill in thier information. This card also has a paragraph stating this information is required by federal law and must be reported by the receiving committee. Also included is a postage paid, pre-addressed envelope for use in returning this information.