

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Lincoln Davis for Congress

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	124481.73	678200.15
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	124481.73	678150.15
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	125206.44	437308.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	5791.01
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	125206.44	431517.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	198397.27	
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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Lincoln Davis for Congress

Report Covering the Period: From:

M	M
0	7

D	D
1	5

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

23344.76

158414.26

(ii) Unitemized.....

16420.00

47825.00

(iii) TOTAL of contributions

39764.76

206239.26

from individuals..... ▶

100.00

8600.00

(b) Political Party Committees.....

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

84616.97

463360.89

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

124481.73

678200.15

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

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

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

5791.01

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

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

124481.73

683991.16

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	125206.44	437308.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	208040.71
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	208040.71
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	50.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	50.00
21. OTHER DISBURSEMENTS.....	56342.13	90439.34
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	181548.57	735838.60

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	255464.11
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	124481.73
25. SUBTOTAL (add Line 23 and Line 24).....	379945.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	181548.57
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	198397.27

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 83
	<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	

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)
Frank H. Akers

Mailing Address 188 Whippoorwill Drive

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
Oak Ridge National Lab Assoc Lab Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2006

Transaction ID: SA11A1.17917

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)
Ozel Allen

Mailing Address 2755 Short Mountain Road

City State Zip Code
McMinnville TN 37110

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

Name of Employer Occupation
Self Construction

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2006

Transaction ID: SA11A1.17766

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)
Jeri R. Arledge

Mailing Address 11780 Lower East Valley Rd

City State Zip Code
Pikeville TN 37367

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

Name of Employer Occupation
Manderly Farms Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2006

Transaction ID: SA11A1.17867

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)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 83
	<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)
Cecil D. Branstetter

Mailing Address 227 Second Ave North 4th Floor

City Nashville State TN Zip Code 37201

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

Name of Employer Self Occupation Attorney at Law

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 6 / 2 0 0 6

Transaction ID: SA11A1.18075

Amount of Each Receipt this Period
 200.00

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

B. Full Name (Last, First, Middle Initial)
Bill Brewster

Mailing Address PO Box 459

City Batesville State TX Zip Code 78829

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

Name of Employer Capital Hill Group Occupation Chairman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.17871

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)
Suzie Brewster

Mailing Address 499 S. Capital Street SW Suite 608-A

City Washington State DC Zip Code 20003

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

Name of Employer Suzie Brewster and Associates Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.17883

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) ► **700.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 83
	<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 D. Brown

Mailing Address 123 Blackburn Ave

City Nashville State TN Zip Code 37205

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

Name of Employer Retired Occupation Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 15 / 2006

Transaction ID: SA11A1.17936

Amount of Each Receipt this Period
 100.00

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

B. Full Name (Last, First, Middle Initial)
Joe C. Burns

Mailing Address PO Box 851

City Pikeville State TN Zip Code 37367

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

Name of Employer Self Occupation Farmer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 15 / 2006

Transaction ID: SA11A1.17870

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)
Mike Cardin

Mailing Address 13095 Ladds Cove Road

City South Pittsburg State TN Zip Code 37380

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

Name of Employer Cardin Forest Products LLC Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 10 / 2006

Transaction ID: SA11A1.17756

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)	▶	2850.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 83
	<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)
Mike Cardin

Mailing Address 13095 Ladds Cove Road

City State Zip Code
South Pittsburg TN 37380

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

Name of Employer Occupation
Cardin Forest Products LLC Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2006

Transaction ID: SA11A1.17760

Amount of Each Receipt this Period
-1000.00

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

B. Full Name (Last, First, Middle Initial)
Mike Cardin

Mailing Address 13095 Ladds Cove Road

City State Zip Code
South Pittsburg TN 37380

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

Name of Employer Occupation
Cardin Forest Products LLC Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ .00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2006

Transaction ID: SA11A1.17761

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Bobby E. Carter

Mailing Address 360 Summertown Road

City State Zip Code
Jasper TN 37347

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

Name of Employer Occupation
Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2006

Transaction ID: SA11A1.17779

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)	500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 83
	<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

Full Name (Last, First, Middle Initial) A. Roger Dale Coates		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 363 Defeted Creek Road		Transaction ID: SA11A1.17945	
City State Zip Code Centerville TN 37033	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Bon Aqua Utility District Water Treatment Operator	Election Cycle-to-Date 250.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Robert Collier		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2006	
Mailing Address 3531 Smithville Hwy		Transaction ID: SA11A1.17843	
City State Zip Code McMinnville TN 37110	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Retired	Election Cycle-to-Date 250.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Jerry W. Cooper		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2006	
Mailing Address PO Box 79		Transaction ID: SA11A1.17765	
City State Zip Code Smartt TN 37378	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation State of Tennessee Senator	Election Cycle-to-Date 500.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 83
	<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)
James Davenport

Mailing Address 1809 W. Lincoln Street

City State Zip Code
Tullahoma TN 37388

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

Name of Employer Occupation
Tullahoma Industries Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2006

Transaction ID: SA11A1.17865

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)
Gary Dawkins

Mailing Address PO Box 98

City State Zip Code
Jasper TN 37347

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

Name of Employer Occupation
Retired Self

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2006

Transaction ID: SA11A1.17823

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)
Gary Dawkins

Mailing Address PO Box 98

City State Zip Code
Jasper TN 37347

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

Name of Employer Occupation
Retired Self

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2006

Transaction ID: SA11A1.18050

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)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 83
	<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

Full Name (Last, First, Middle Initial) A. Jane W. Dawkins		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 6
Mailing Address PO Box 533		Transaction ID: SA11A1.17828
City State Zip Code South Pittsburg TN 37380	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Dawkins Southern Insurance Agent	Election Cycle-to-Date 250.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Tyler Dawkins		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 0 6
Mailing Address 508 Holly Ave		Transaction ID: SA11A1.18063
City State Zip Code South Pittsburg TN 37380	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Dawkins Southern Insurance Agent	Election Cycle-to-Date 250.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. David B. Denton		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 6
Mailing Address 100 Fairways Blvd W		Transaction ID: SA11A1.17985
City State Zip Code Tullahoma TN 37388	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Roger's Group Vice President East Div	Election Cycle-to-Date 300.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 83
	<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)
Donny M. Eaton

Mailing Address 139 Old Patton Lane

City State Zip Code
Harriman TN 37748

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2006

Transaction ID: SA11A1.17964

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)
Robert R. Evans

Mailing Address PO Box 52

City State Zip Code
Pikeville TN 37367

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2006

Transaction ID: SA11A1.17875

Amount of Each Receipt this Period
300.00

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

C. Full Name (Last, First, Middle Initial)
John A. Fountain

Mailing Address 200 Pomeroy Drive

City State Zip Code
Fairfield Glade TN 38558

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2006

Transaction ID: SA11A1.17920

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 83
	<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

Full Name (Last, First, Middle Initial) A. John N. Foy		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2006	
Mailing Address 6148 Lee Hwy Suite 300		Transaction ID: SA11A1.17895	
City State Zip Code Chattanooga TN 37421	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer CBL & Associates Inc	Occupation Executive Vice-President		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. William H. Freeman		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address PO Box 23857		Transaction ID: SA11A1.17940	
City State Zip Code Nashville TN 37202	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Freeman Webb Co Realtors	Occupation Owner		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Michael D. Galligan		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2006	
Mailing Address Po Box 289		Transaction ID: SA11A1.17762	
City State Zip Code McMinnville TN 37111	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Self	Occupation Attorney at Law		
Receipt For: 2006 <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) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 83
	<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)
Deborah B. Garrett

Mailing Address PO Box 115

City State Zip Code
Byrdstown TN 38549

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

Name of Employer Self Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 19 / 2006

Transaction ID: SA11A1.17913

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)
Eugene Heller

Mailing Address 2411 Pulaski Hwy

City State Zip Code
Columbia TN 38401

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.18389

Amount of Each Receipt this Period
25.00

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

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

Mailing Address 209 Kingsbridge Blvd

City State Zip Code
Tullahoma TN 37388

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

Name of Employer L & H Distributing Occupation Distribution

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 469.76

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2006

Transaction ID: SA11A1.18107

Amount of Each Receipt this Period
269.76

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

SUBTOTAL of Receipts This Page (optional) ▶ **794.76**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 83
	<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)
Max L. Howe

Mailing Address PO Box 44

City State Zip Code
Sequatchie TN 37374

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2006

Transaction ID: SA11A1.17785

Amount of Each Receipt this Period
200.00

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

B. Full Name (Last, First, Middle Initial)
June Huckeby

Mailing Address 1032 Old Rock Island Road

City State Zip Code
Rock Island TN 38581

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 15 / 2006

Transaction ID: SA11A1.17839

Amount of Each Receipt this Period
100.00

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

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

Mailing Address Po Box 6197

City State Zip Code
Sparta TN 38583

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

Name of Employer Self Occupation
Lawyer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.18373

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)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 83
	<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)
Charles Michael Layne

Mailing Address 551 Asbury Road

City Manchester State TN Zip Code 37355

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

Name of Employer State of TN Occupation DA 4th Judicial District

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 6 / 2 0 0 6

Transaction ID: SA11A1.18056

Amount of Each Receipt this Period
 100.00

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

B. Full Name (Last, First, Middle Initial)
Gary McNabb

Mailing Address PO Box 939

City Cookeville State TN Zip Code 38503

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

Name of Employer Self Occupation Business

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.17901

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)
James O Mills

Mailing Address 915 Vine Street

City Chattanooga State TN Zip Code 37403

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

Name of Employer Olan Mills Studio Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.17896

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)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 83
	<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)
Olan Mills, II

Mailing Address 4325 Amnicola Hgwy

City State Zip Code
Chattanooga TN 37406

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

Name of Employer Occupation
Olan Mills Studio Photographer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 08 / 2006

Transaction ID: SA11A1.17903

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)
Howell Moss

Mailing Address 322 MJ Moss Loop

City State Zip Code
Jasper TN 37347

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

Name of Employer Occupation
Farmer/CO Manager Marion County

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2006

Transaction ID: SA11A1.17778

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)
James David Oliver

Mailing Address PO Box 579

City State Zip Code
Monteagle TN 37356

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

Name of Employer Occupation
Village Shoppe Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2006

Transaction ID: SA11A1.17767

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) ▶ **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 83
	<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)
David Pennington

Mailing Address 1001 Hillsboro Rd

City Manchester State TN Zip Code 37355

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

Name of Employer Self Occupation Retail Sales

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2006

Transaction ID: SA11A1.17993

Amount of Each Receipt this Period
 200.00

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

B. Full Name (Last, First, Middle Initial)
Geoffrey J. Post

Mailing Address 4564 Main Street

City Jasper State TN Zip Code 37347

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ .00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 10 / 2006

Transaction ID: SA11A1.17810

Amount of Each Receipt this Period
 100.00

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

C. Full Name (Last, First, Middle Initial)
Nancy E. Post

Mailing Address 4564 Main Street

City Jasper State TN Zip Code 37347

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ .00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 10 / 2006

Transaction ID: SA11A1.17809

Amount of Each Receipt this Period
 -100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 83
	<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)
J. Stanley Rogers

Mailing Address 100 N Spring Street

City Manchester State TN Zip Code 37355

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

Name of Employer Self Occupation Property Management

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.18068

Amount of Each Receipt this Period
 200.00

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

B. Full Name (Last, First, Middle Initial)
Sam Sawyer

Mailing Address 501 North Jackson Street

City Tullahoma State TN Zip Code 37388

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

Name of Employer Self Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.18066

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)
Paula Kay Sewell

Mailing Address Po Box 927

City Jamestown State TN Zip Code 38556

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

Name of Employer Unemployed Occupation Housewife

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.17972

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)	▶	1450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 83
	<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)
James D. Sproul

Mailing Address PO Box 88

City Columbia State TN Zip Code 38402

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

Name of Employer Swarco Occupation Engineer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2006

Transaction ID: SA11A1.17929

Amount of Each Receipt this Period
 100.00

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

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

Mailing Address PO Box 891

City Dunlap State TN Zip Code 37327

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

Name of Employer Self Occupation Insurance Agent

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2006

Transaction ID: SA11A1.17887

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)
John Mark Stewart

Mailing Address 301 Shadowbrook Road

City Winchester State TN Zip Code 37398

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

Name of Employer Self Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 24 / 2006

Transaction ID: SA11A1.18002

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)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 83
	<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)
Perry Swafford

Mailing Address PO Box 418

City Dunlap State TN Zip Code 37327

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

Name of Employer Sequatchie Valley Diesel Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2006

Transaction ID: SA11A1.17885

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)
Dixie Taylor-Huff

Mailing Address 6025 Hwy 231 S

City Castalian Springs State TN Zip Code 37035

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

Name of Employer Self-employed Occupation Healthcare

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2006

Transaction ID: SA11A1.17905

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)
Mike Tucker

Mailing Address 208 Harbin Road

City Fayetteville State TN Zip Code 37334

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

Name of Employer Chrysler Corporation Occupation Tool Maker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.18380

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) ► 1750.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 83
	<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)
Rubye K. Vann

Mailing Address 342 Euclid Ave

City State Zip Code
Kingston TN 37763

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.18365

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)
Alan D. Wheat

Mailing Address 836 West 51st Street

City State Zip Code
Kansas City MO 64112

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

Name of Employer Wheat & Associates Occupation Congressman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2006

Transaction ID: SA11A1.18105

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)
Greg Wilson

Mailing Address PO Box 844

City State Zip Code
Spencer TN 38585

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

Name of Employer Retired Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11A1.18351

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	1100.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 83
	<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)
Joe Ray Wilson

Mailing Address PO Box 533

City State Zip Code
South Pittsburg TN 37380

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

Name of Employer Nations Bank Occupation Retired Banker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 6 / 2 0 0 6

Transaction ID: SA11A1.18048

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)
James Woodard

Mailing Address PO Box 116

City State Zip Code
Tullahoma TN 37388

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

Name of Employer Woodard's Jewelry Occupation Merchant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.17986

Amount of Each Receipt this Period
300.00

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

C. Full Name (Last, First, Middle Initial)
James F Wright

Mailing Address 364 Dogwood Road

City State Zip Code
Caryville TN 37717

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

Name of Employer United Mine Workers of America Occupation Labor Rep

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.18387

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)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	23344.76

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 83
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" 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)
Marion County Democratic Party

Mailing Address 168 Sweetens Cove Road

City State Zip Code
South Pittsburg TN 37380

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 10 / 2006

Transaction ID: SA11B.17754

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	100.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 83
	(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

Full Name (Last, First, Middle Initial) A. ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2006
Mailing Address 120 Park Avenue		Transaction ID: SA11C.18210
City State Zip Code New York NY 10017	FEC ID number of contributing federal political committee. C C00089136	Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. American Bankers Association		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 1120 Connecticut Avenue NW		Transaction ID: SA11C.18407
City State Zip Code Washington DC 20038	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 7500.00	

Full Name (Last, First, Middle Initial) C. American Federation of State County & Municipal Employees - P E O P L E, Qualified		Date of Receipt M M / D D / Y Y Y Y Y 09 / 13 / 2006
Mailing Address 1625 L Street NW		Transaction ID: SA11C.17969
City State Zip Code Washington DC 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: 2006 <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)	4500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 83
	<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

Full Name (Last, First, Middle Initial) A. AMERICAN FEDERATION OF TEACHERS		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 555 NEW JERSEY AVE., NW		Transaction ID: SA11C.18408
City WASHINGTON State DC Zip Code 20001	FEC ID number of contributing federal political committee. C C70002472	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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6000.00	

Full Name (Last, First, Middle Initial) B. AMERICAN MEDICAL ASSOCIATION		Date of Receipt M M / D D / Y Y Y Y Y 09 / 22 / 2006
Mailing Address 1101 VERMONT AVENUE NW		Transaction ID: SA11C.17891
City WASHINGTON State DC Zip Code 20005	FEC ID number of contributing federal political committee. C C70001847	Amount of Each Receipt this Period 1750.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2750.00	

Full Name (Last, First, Middle Initial) C. AMERICAN ROAD & TRANSPORTATION BUILDERS ASSOCIATION - PAC (ARTBA-PAC) - 525 PAC		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 1010 MASSACHUSETTS AVENUE NW		Transaction ID: SA11C.18413
City WASHINGTON State DC Zip Code 20001	FEC ID number of contributing federal political committee. C C00118208	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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	3750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 83
	<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

Full Name (Last, First, Middle Initial) A. AZ PAC (ZENECA INC)		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address 1800 CONCORD PIKE		Transaction ID: SA11C.18099	
City State Zip Code WILMINGTON DE 19850		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C70003181		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Build Political Action Committee of the National Association of Home Builders		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address 1201 15TH Street NW		Transaction ID: SA11C.18093	
City State Zip Code Washington DC 20005		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00000901		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. CAPELLA HEALTHCARE, INC. GOVERNMENT AFFAIRS COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 501 CORPORATE CENTRE DRIVE STE 200		Transaction ID: SA11C.17751	
City State Zip Code FRANKLIN TN 37067		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C C00421420		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <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) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 83
	<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

Full Name (Last, First, Middle Initial) A. CATERPILLAR EMPLOYEES POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006	
Mailing Address 100 N E ADAMS ST		Transaction ID: SA11C.18211	
City State Zip Code PEORIA IL 61629		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00148031		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. COALPAC A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 101 Constitution Avenue NW Suite 500 East		Transaction ID: SA11C.18404	
City State Zip Code Washington DC 20001		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00109819		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. DARDEN RESTAURANTS INC EMPLOYEES GOOD GOVERNMENT FUND (FKA GENERAL MILLS RESTAURANTS)		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address 5900 LAKE ELLENOR DRIVE		Transaction ID: SA11C.18101	
City State Zip Code ORLANDO FL 32809		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00108282		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5000.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 83
	<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

Full Name (Last, First, Middle Initial) A. ELI LILLY AND COMPANY		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2006	
Mailing Address LILLY COPORATE CENTER		Transaction ID: SA11C.18091	
City State Zip Code INDIANAPOLIS IN 46285		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C70003629		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. ELI LILLY AND COMPANY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address LILLY COPORATE CENTER		Transaction ID: SA11C.18409	
City State Zip Code INDIANAPOLIS IN 46285		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C70003629		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006	
Mailing Address 50 F Street NW Suite 900		Transaction ID: SA11C.17750	
City State Zip Code Washington DC 20001		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00193631		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 83
	<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

Full Name (Last, First, Middle Initial) A. Federal Express Mailing Address PO Box 1140 City State Zip Code Memphis TN 38101 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 Transaction ID: SA11C.18414 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. HARDWOOD FEDERATION PAC INC Mailing Address 6830 RALEIGH - LAGRANGE ROAD City State Zip Code MEMPHIS TN 38134 FEC ID number of contributing federal political committee. C C00396671		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006 Transaction ID: SA11C.17892 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. International Union of Operating Engineers Mailing Address 1125 17th Street NW City State Zip Code Washington DC 20036 FEC ID number of contributing federal political committee. C C70001037		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006 Transaction ID: SA11C.18348 Amount of Each Receipt this Period 4000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 5500.00	

SUBTOTAL of Receipts This Page (optional)	10000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 83
	<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

Full Name (Last, First, Middle Initial) A. JOHNSON & JOHNSON EMPLOYEES' GOOD GOVERNMENT FUND		Date of Receipt M M / D D / Y Y Y Y Y 09 / 06 / 2006
Mailing Address One Johnson & Johnson Plaza		Transaction ID: SA11C.18090
City State Zip Code New Brunswick NJ 08933	FEC ID number of contributing federal political committee. C C00010983	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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 655 15th Street NW Suite 445		Transaction ID: SA11C.18417
City State Zip Code Washington DC 20005	FEC ID number of contributing federal political committee. C C00236489	Amount of Each Receipt this Period 4500.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) C. Laborers' Political League-Laborers' International Union of NA		Date of Receipt M M / D D / Y Y Y Y Y 09 / 06 / 2006
Mailing Address 905 16th Street NW Second Floor		Transaction ID: SA11C.18096
City State Zip Code Washington DC 20006	FEC ID number of contributing federal political committee. C C00007922	Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 83
	<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) Lumber Dealers PAC Mailing Address 40 Ivy Street SE City Washington State DC Zip Code 20003 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2006 Transaction ID: SA11C.17970 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) Machinists Non-Partisan Political League Mailing Address 9000 Machinist Plac City Upper Marlboro State MD Zip Code 20772 FEC ID number of contributing federal political committee. C C00002469		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006 Transaction ID: SA11C.18419 Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 10000.00	

C. Full Name (Last, First, Middle Initial) MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE Mailing Address 1295 State Street City Springfield State MA Zip Code 01111 FEC ID number of contributing federal political committee. C C00118943		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2006 Transaction ID: SA11C.17890 Amount of Each Receipt this Period 3000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)	9000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 83
	(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)
MERCK PAC THE POLITICAL ACTION COMMITTEE FOR MERCK & CO INC

Mailing Address 601 PENN AVENUE NW N BLDG STE 1200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 0 6 / 2 0 0 6

Transaction ID: SA11C.18092

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)
National Air Traffic Controllers Assoc

Mailing Address 1325 Massachusetts Avenue NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 2 2 / 2 0 0 6

Transaction ID: SA11C.18209

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)
NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1630 DUKE STREET 4TH FLOOR

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 2 8 / 2 0 0 6

Transaction ID: SA11C.18212

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)	3000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 83
	<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

Full Name (Last, First, Middle Initial) A. NEA Fund		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 1201 16th Street NW		Transaction ID: SA11C.17893
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3900.00	

Full Name (Last, First, Middle Initial) B. PENSKE TRUCK LEASING CO LP POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address ROUTE 10-GREEN HILLS PO BOX 563		Transaction ID: SA11C.18399
City State Zip Code READING PA 19603	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00373217		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. PHYSICAL THERAPY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 1111 North Fairfax Street		Transaction ID: SA11C.18406
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C C00012880		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 83
	<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

Full Name (Last, First, Middle Initial) A. REITPAC-Real Estate Investments Trusts		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address 1875 I Street NW Suite 600		Transaction ID: SA11C.18411
City Washington State DC Zip Code 20006	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 3000.00
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) B. RJR POLITICAL ACTION COMMITTEE; R. J. REYNOLDS TOBACCO COMPANY		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2006
Mailing Address P. O. Box 718		Transaction ID: SA11C.18410
City Winston-Salem State NC Zip Code 27102	FEC ID number of contributing federal political committee. C C00042002	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. ROGERS GROUP INC POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 09 / 06 / 2006
Mailing Address PO BOX 25250		Transaction ID: SA11C.18103
City NASHVILLE State TN Zip Code 37202	FEC ID number of contributing federal political committee. C C00277152	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼ 3000.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 83
	<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

Full Name (Last, First, Middle Initial) A. SALLIE MAE INC POLITICAL ACTION COMMITTEE (SALLIE MAE PAC)		Date of Receipt MM / DD / YYYY 09 / 25 / 2006
Mailing Address 11600 SALLIE MAE DRIVE		Transaction ID: SA11C.17889
City RESTON	State VA	Zip Code 20193
FEC ID number of contributing federal political committee. C C00331835		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. The GlaxoSmithKline PAC		Date of Receipt MM / DD / YYYY 09 / 06 / 2006
Mailing Address Five Moore Drive		Transaction ID: SA11C.18094
City Triangle Park	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. TIMKEN COMPANY GOOD GOVERNMENT FUND, THE		Date of Receipt MM / DD / YYYY 09 / 06 / 2006
Mailing Address 1835 Dueber Avenue S.W.		Transaction ID: SA11C.18095
City Canton	State OH	Zip Code 44706
FEC ID number of contributing federal political committee. C C00311308		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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 83
	(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	

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

Full Name (Last, First, Middle Initial) A. TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS' INC		Date of Receipt
Mailing Address 430 FIRST STREET SE 2ND FLOOR		<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City	State	Zip Code
WASHINGTON	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.17855
<input type="text" value="C C00002881"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="366.97"/>
Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006	Election Cycle-to-Date	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="366.97"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. UAW - V - CAP (UAW Voluntary Community Action Program)		Date of Receipt
Mailing Address 8000 East Jefferson		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>
City	State	Zip Code
Detroit	MI	48214
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.18416
<input type="text" value="C C00002840"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1000.00"/>
Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006	Election Cycle-to-Date	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="6000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. UNITED MINE WORKERS OF AMERICA - COAL MINERS POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 8315 LEE HIGHWAY, FIFTH FLOOR		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>
City	State	Zip Code
FAIRFAX	VA	22031
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.18420
<input type="text" value="C C00013342"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="5000.00"/>
Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006	Election Cycle-to-Date	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="7000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6366.97"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 83
	<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. UNITED STATES TELECOM ASSOCIATION POLITICAL ACTION COMMITTEE (TELECOMPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 607 14th Street Northwest
Suite 400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000984

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.18403

Amount of Each Receipt this Period
1000.00

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

B. UNITED STEELWORKERS OF AMERICA POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)
Mailing Address FIVE GATEWAY CENTER

City PITTSBURGH State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00003590

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.18415

Amount of Each Receipt this Period
5000.00

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

C. WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: SA11C.18412

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)	8000.00
TOTAL This Period (last page this line number only)	84616.97

**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

Full Name (Last, First, Middle Initial) A. Aristotle		Transaction ID: SB17.18166 Date of Disbursement 08 / 11 / 2006	
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1500.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement SQL Hosting	Category/Type 001	
Candidate Name LINCOLN DAVIS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Cooper & Secret Associates		Transaction ID: SB17.17744 Date of Disbursement 07 / 27 / 2006	
Mailing Address 229 S. Washington St Suite 330		Amount of Each Disbursement this Period 25000.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Poll	Category/Type 005	
Candidate Name LINCOLN DAVIS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Davey Consulting LLC		Transaction ID: SB17.17746 Date of Disbursement 07 / 26 / 2006	
Mailing Address 236 Massachusetts Ave NE #508		Amount of Each Disbursement this Period 2708.41	
City Washington State DC Zip Code 20002	Purpose of Disbursement Fundraising	Category/Type 003	
Candidate Name LINCOLN DAVIS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	29208.41
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

Full Name (Last, First, Middle Initial) A. Davey Consulting LLC		Transaction ID: SB17.18134 Date of Disbursement 09 / 05 / 2006	
Mailing Address 236 Massachusetts Ave NE #508		Amount of Each Disbursement this Period 2250.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement Fundraising Candidate Name LINCOLN DAVIS Category/Type 003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Fentress Courier		Transaction ID: SB17.18204 Date of Disbursement 09 / 25 / 2006	
Mailing Address PO Box 1198		Amount of Each Disbursement this Period 60.00	
City Jamestown State TN Zip Code 38556	Purpose of Disbursement Ads Candidate Name LINCOLN DAVIS Category/Type 004	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. William C. Fischer		Transaction ID: SB17.18109 Date of Disbursement 07 / 25 / 2006	
Mailing Address 1214 Kirkwood Avenue		Amount of Each Disbursement this Period 854.97	
City Murfreesboro State TN Zip Code 37130	Purpose of Disbursement Wages Candidate Name LINCOLN DAVIS Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3164.97
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

Full Name (Last, First, Middle Initial) A. William C. Fischer		Transaction ID: SB17.18147 Date of Disbursement 07 / 25 / 2006
Mailing Address 1214 Kirkwood Avenue		Amount of Each Disbursement this Period 1280.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Murfreesboro State TN Zip Code 37130	002 Category/Type	
Purpose of Disbursement Reimburse Mileage 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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. William C. Fischer		Transaction ID: SB17.18159 Date of Disbursement 08 / 15 / 2006
Mailing Address 1214 Kirkwood Avenue		Amount of Each Disbursement this Period 854.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Murfreesboro State TN Zip Code 37130	001 Category/Type	
Purpose of Disbursement 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. William C. Fischer		Transaction ID: SB17.18169 Date of Disbursement 08 / 17 / 2006
Mailing Address 1214 Kirkwood Avenue		Amount of Each Disbursement this Period 647.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Murfreesboro State TN Zip Code 37130	002 Category/Type	
Purpose of Disbursement Reimburse Mileage 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2783.07
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

Full Name (Last, First, Middle Initial) A. William C. Fischer		Transaction ID: SB17.18175 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6
Mailing Address 1214 Kirkwood Avenue		Amount of Each Disbursement this Period 854.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Murfreesboro State TN Zip Code 37130	Category/ Type 001	
Purpose of Disbursement 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. William C. Fischer		Transaction ID: SB17.18180 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address 1214 Kirkwood Avenue		Amount of Each Disbursement this Period 609.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Murfreesboro State TN Zip Code 37130	Category/ Type 002	
Purpose of Disbursement Reimburse Mileage 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. William C. Fischer		Transaction ID: SB17.18194 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address 1214 Kirkwood Avenue		Amount of Each Disbursement this Period 854.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Murfreesboro State TN Zip Code 37130	Category/ Type 001	
Purpose of Disbursement 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2319.59
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

Full Name (Last, First, Middle Initial) A. William C. Fischer		Transaction ID: SB17.18196 Date of Disbursement 09 / 15 / 2006	
Mailing Address 1214 Kirkwood Avenue		Amount of Each Disbursement this Period 801.00	
City Murfreesboro State TN Zip Code 37130	Purpose of Disbursement Reimburse Mileage Expense Candidate Name LINCOLN DAVIS	Category/Type 002 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. William C. Fischer		Transaction ID: SB17.18205 Date of Disbursement 09 / 29 / 2006	
Mailing Address 1214 Kirkwood Avenue		Amount of Each Disbursement this Period 854.97	
City Murfreesboro State TN Zip Code 37130	Purpose of Disbursement Wages Candidate Name LINCOLN DAVIS	Category/Type 001 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Fletcher & Rowley		Transaction ID: SB17.18115 Date of Disbursement 08 / 10 / 2006	
Mailing Address 818 18th Avenue So		Amount of Each Disbursement this Period 11528.39	
City Nashville State TN Zip Code 37203	Purpose of Disbursement Ad Production Candidate Name LINCOLN DAVIS	Category/Type 004 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	13184.36
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. Beecher Frasier, III Full Name (Last, First, Middle Initial) Mailing Address 6202 Rock Springs Road City Nolensville State TN Zip Code 37135 Purpose of Disbursement Catering Event 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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.18121 Date of Disbursement 08 / 02 / 2006 Amount of Each Disbursement this Period 804.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Robert B. Hennigan Full Name (Last, First, Middle Initial) Mailing Address 209 Kingsbridge Blvd City Tullahoma State TN Zip Code 37388 Purpose of Disbursement In-kind - Refreshments for Event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.18108 Date of Disbursement 08 / 25 / 2006 Amount of Each Disbursement this Period 269.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. National Democratic Club Full Name (Last, First, Middle Initial) Mailing Address 30 Ivy Street City Washington State DC Zip Code 20003 Purpose of Disbursement Dining Room Rent 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.18160 Date of Disbursement 08 / 11 / 2006 Amount of Each Disbursement this Period 45.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶	1119.66
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

Full Name (Last, First, Middle Initial) A. Office Depot #210		Transaction ID: SB17.18177 Date of Disbursement 08 / 30 / 2006
Mailing Address 4504 Harding Road		Amount of Each Disbursement this Period 141.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Nashville State TN Zip Code 37205		
Purpose of Disbursement Printer Cartridges Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) B. Print Mart		Transaction ID: SB17.18151 Date of Disbursement 08 / 01 / 2006
Mailing Address 1010 Bradford Hicks Drive		Amount of Each Disbursement this Period 864.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Livingston State TN Zip Code 38570		
Purpose of Disbursement Printing Candidate Name LINCOLN DAVIS Category/Type 004		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) C. Promotions Plus		Transaction ID: SB17.17748 Date of Disbursement 07 / 26 / 2006
Mailing Address 71 4th Street		Amount of Each Disbursement this Period 753.33 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Crossville State TN Zip Code 38555		
Purpose of Disbursement T-Shirts Candidate Name LINCOLN DAVIS Category/Type 004		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

SUBTOTAL of Disbursements This Page (optional) ▶	1758.79
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

<p>A. Promotions Plus</p> <p>Full Name (Last, First, Middle Initial) Lincoln Davis for Congress</p> <p>Mailing Address 71 4th Street</p> <p>City Crossville State TN Zip Code 38555</p> <p>Purpose of Disbursement Yard Signs</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>Transaction ID: SB17.17749</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7438.16"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="004"/></p>

<p>B. Promotions Plus</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 71 4th Street</p> <p>City Crossville State TN Zip Code 38555</p> <p>Purpose of Disbursement Printing</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>Transaction ID: SB17.18167</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="498.99"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="004"/></p>

<p>C. Promotions Plus</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 71 4th Street</p> <p>City Crossville State TN Zip Code 38555</p> <p>Purpose of Disbursement Printing</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>Transaction ID: SB17.18188</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2025.96"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="004"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="9963.11"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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

Full Name (Last, First, Middle Initial) A. Promotions Plus		Transaction ID: SB17.18198 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address 71 4th Street		Amount of Each Disbursement this Period 476.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Crossville State TN Zip Code 38555		
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	Category/Type 004	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Ralph		Transaction ID: SB17.18122 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address 3600 Jackson Street		Amount of Each Disbursement this Period 966.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City San Francisco State CA Zip Code 94118		
Purpose of Disbursement Office Rent Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Category/Type 001	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Richard Ralph		Transaction ID: SB17.18132 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 3600 Jackson Street		Amount of Each Disbursement this Period 966.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City San Francisco State CA Zip Code 94118		
Purpose of Disbursement Office Rent Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Category/Type 001	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2408.74
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

Full Name (Last, First, Middle Initial) A. Sharon B. Davis		Transaction ID: SB17.18192 Date of Disbursement 09 / 06 / 2006
Mailing Address 104 Circle lane		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
City Jamestown State TN Zip Code 38556	001 Category/Type	
Purpose of Disbursement Bookkeeping 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sharon B. Davis		Transaction ID: SB17.18157 Date of Disbursement 09 / 25 / 2006
Mailing Address 104 Circle lane		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
City Jamestown State TN Zip Code 38556	001 Category/Type	
Purpose of Disbursement Bookkeeping 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Splendid Fare		Transaction ID: SB17.17741 Date of Disbursement 07 / 26 / 2006
Mailing Address 1310 Braddock Place		Amount of Each Disbursement this Period 2096.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexanderis State VA Zip Code 22314	003 Category/Type	
Purpose of Disbursement Catering Event 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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4096.03
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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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

Full Name (Last, First, Middle Initial) A. Stephens & Associates		Transaction ID: SB17.18152 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address 71 4th Street		Amount of Each Disbursement this Period 125.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Crossville State TN Zip Code 38555		
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	Category/Type 004	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Stephens & Associates		Transaction ID: SB17.18165 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 71 4th Street		Amount of Each Disbursement this Period 75.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Crossville State TN Zip Code 38555		
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	Category/Type 004	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Twin Lakes Telephone Coop		Transaction ID: SB17.18156 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address PO Box 799		Amount of Each Disbursement this Period 83.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Jamestown State TN Zip Code 38556		
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	Category/Type 001	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	283.21
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

Full Name (Last, First, Middle Initial) A. Twin Lakes Telephone Coop		Transaction ID: SB17.18179 Date of Disbursement 09 / 06 / 2006	
Mailing Address PO Box 799		Amount of Each Disbursement this Period 45.06	
City Jamestown	State TN	Zip Code 38556	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
Purpose of Disbursement Telephone Service		Category/ Type 001	
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

Full Name (Last, First, Middle Initial) B. Twin Lakes Telephone Coop		Transaction ID: SB17.18185 Date of Disbursement 09 / 06 / 2006	
Mailing Address PO Box 799		Amount of Each Disbursement this Period 83.21	
City Jamestown	State TN	Zip Code 38556	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
Purpose of Disbursement Telephone Service		Category/ Type 001	
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

Full Name (Last, First, Middle Initial) C. Union Bank of Jamestown		Transaction ID: SB17.18168 Date of Disbursement 08 / 15 / 2006	
Mailing Address PO Box 100		Amount of Each Disbursement this Period 532.80	
City Jamestown	State TN	Zip Code 38556	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
Purpose of Disbursement 941 Electronic Funds		Category/ Type 001	
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

SUBTOTAL of Disbursements This Page (optional)	661.07
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

Full Name (Last, First, Middle Initial) A. Union Bank of Jamestown		Transaction ID: SB17.18195 Date of Disbursement 09 / 14 / 2006	
Mailing Address PO Box 100		Amount of Each Disbursement this Period 532.80	
City Jamestown	State TN	Zip Code 38556	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement 941 Electronic Funds		Category/ Type 001	
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

Full Name (Last, First, Middle Initial) B. Union Bank of Jamestown		Transaction ID: SB17.18235 Date of Disbursement 09 / 29 / 2006	
Mailing Address PO Box 100		Amount of Each Disbursement this Period 45.35	
City Jamestown	State TN	Zip Code 38556	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Printing Deposit Tickets		Category/ Type 001	
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: SB17.18146 Date of Disbursement 08 / 01 / 2006	
Mailing Address North Main Street		Amount of Each Disbursement this Period 39.00	
City Jamestown	State TN	Zip Code 38556	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Postage		Category/ Type 001	
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

SUBTOTAL of Disbursements This Page (optional)	617.15
TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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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

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: SB17.18193 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6
Mailing Address North Main Street		Amount of Each Disbursement this Period 39.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City State Zip Code Jamestown TN 38556	Purpose of Disbursement Postage Category/Type 001	
Candidate Name LINCOLN DAVIS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: SB17.18154 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 2 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 239.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City State Zip Code Atlanta GA 30348	Purpose of Disbursement Telephone Service Category/Type 001	
Candidate Name LINCOLN DAVIS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: SB17.18114 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 72.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City State Zip Code Atlanta GA 30348	Purpose of Disbursement Telephone Service Category/Type 001	
Candidate Name LINCOLN DAVIS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

SUBTOTAL of Disbursements This Page (optional) ▶	350.65
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

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: SB17.18123 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 102.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: SB17.18155 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 164.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: SB17.18118 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 211.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

SUBTOTAL of Disbursements This Page (optional) ▶	477.59
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

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: SB17.18178 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 244.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: SB17.18124 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 408.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: SB17.18176 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 140.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

SUBTOTAL of Disbursements This Page (optional) ▶	792.67
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

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: SB17.18133 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 54.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: SB17.18214 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 77.88 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: SB17.18203 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 241.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

SUBTOTAL of Disbursements This Page (optional) ▶	373.49
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

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: SB17.18199 Date of Disbursement 09 / 25 / 2006
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 140.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348	001 Category/Type	
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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: SB17.18230 Date of Disbursement 09 / 28 / 2006
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 253.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30348	001 Category/Type	
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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Victory 2006		Transaction ID: SB17.18112 Date of Disbursement 08 / 10 / 2006
Mailing Address 208 8th Ave N		Amount of Each Disbursement this Period 25000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Nashville State TN Zip Code 37201	003 Category/Type	
Purpose of Disbursement Mailouts 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	25393.44
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

Full Name (Last, First, Middle Initial) A. Victory 2006		Transaction ID: SB17.18117 Date of Disbursement 08 / 12 / 2006	
Mailing Address 208 8th Ave N		Amount of Each Disbursement this Period 10000.00	
City Nashville State TN Zip Code 37201	Purpose of Disbursement Postage for Mailouts Category/Type 004	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. VISA		Transaction ID: SB17.18231 Date of Disbursement 08 / 01 / 2006	
Mailing Address PO Box 30131		Amount of Each Disbursement this Period 4160.72	
City Tampa State FL Zip Code 33630	Purpose of Disbursement Travel Expense Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. US Post Office		Transaction ID: SB17.18231.1 Date of Disbursement 07 / 31 / 2006	
Mailing Address 2278 Hwy 41S		Amount of Each Disbursement this Period 2028.00	
City Nashville State TN Zip Code 37201	Purpose of Disbursement Postage Category/Type 003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	14160.72
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. Shell Oil</p> <p>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 Fuel</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>Transaction ID: SB17.18231.2</p> <p>Date of Disbursement 07 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 61.00</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>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type 002</p>		

<p>B. Hyatt Hotels</p> <p>Full Name (Last, First, Middle Initial) Hyatt Hotels</p> <p>Mailing Address 2800 Ocean Gateway</p> <p>City Cambridge State MD Zip Code 21613</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>Transaction ID: SB17.18231.3</p> <p>Date of Disbursement 07 / 29 / 2006</p> <p>Amount of Each Disbursement this Period 838.63</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>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type 002</p>		

<p>C. South Street Restaurant</p> <p>Full Name (Last, First, Middle Initial) South Street Restaurant</p> <p>Mailing Address 6765 Old Hickory</p> <p>City Nashville State TN Zip Code 37215</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>Transaction ID: SB17.18231.4</p> <p>Date of Disbursement 07 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 232.12</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>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type 003</p>		

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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

Full Name (Last, First, Middle Initial) A. American Cellular		Transaction ID: SB17.18231.5 Date of Disbursement 07 / 30 / 2006
Mailing Address 7054 Charlotte Pike		Amount of Each Disbursement this Period 208.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Nashville	State TN Zip Code 37209	
Purpose of Disbursement Telephone Service	001 Category/Type	
Candidate Name LINCOLN DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: SB17.18231.8 Date of Disbursement 08 / 02 / 2006
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 152.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Atlanta	State GA Zip Code 30348	
Purpose of Disbursement Telephone Service	001 Category/Type	
Candidate Name LINCOLN DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

Full Name (Last, First, Middle Initial) C. Exxon Mobile 75		Transaction ID: SB17.18231.9 Date of Disbursement 08 / 02 / 2006
Mailing Address North Main Street		Amount of Each Disbursement this Period 72.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Crossville	State TN Zip Code 38555	
Purpose of Disbursement Gasoline	002 Category/Type	
Candidate Name LINCOLN DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

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

<p>A. Sam Hill Restaurant</p> <p>Full Name (Last, First, Middle Initial) Sam Hill Restaurant</p> <p>Mailing Address 1144 Riverside Drive</p> <p>City Columbia State TN Zip Code 38401</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</p> <p>State: TN District: 04</p>		<p>Transaction ID: SB17.18231.10</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="38.00"/></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>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="002"/></p>

<p>B. Shell Oil</p> <p>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>Transaction ID: SB17.18231.12</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="61.00"/></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>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="002"/></p>

<p>C. Prater's BBQ</p> <p>Full Name (Last, First, Middle Initial) Prater's BBQ</p> <p>Mailing Address 9915 Manchester Hwy</p> <p>City Manchester State TN Zip Code 37110</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</p> <p>State: TN District: 04</p>		<p>Transaction ID: SB17.18231.13</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.67"/></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>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="002"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></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 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. Hunan Dynasty</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 215 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003</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>Transaction ID: SB17.18231.15</p> <p>Date of Disbursement</p> <p>07 / 25 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>75.00</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>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p>003</p>

<p>B. Holiday Inn Express</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 7160 Chancery</p> <p>City Manchester State TN Zip Code 37375</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>Transaction ID: SB17.18231.16</p> <p>Date of Disbursement</p> <p>07 / 26 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>74.75</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>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p>003</p>

<p>C. VISA</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 30131</p> <p>City Tampa State FL Zip Code 33630</p> <p>Purpose of Disbursement Travel</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>Transaction ID: SB17.18232</p> <p>Date of Disbursement</p> <p>08 / 30 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>5457.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p>002</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>5457.98</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

Full Name (Last, First, Middle Initial) A. US Post Office		Transaction ID: SB17.18232.0 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 2278 Hwy 41S		Amount of Each Disbursement this Period 1248.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Nashville State TN Zip Code 37201		
Purpose of Disbursement Postage Candidate Name LINCOLN DAVIS Category/Type 003		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) B. Staples Office Supply		Transaction ID: SB17.18232.3 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 2547 N. Main Street		Amount of Each Disbursement this Period 58.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Crossville State TN Zip Code 38555		
Purpose of Disbursement Ink Cartridge Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Transaction ID: SB17.18232.4 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 6
Mailing Address PO Box 105378		Amount of Each Disbursement this Period 109.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Atlanta State GA Zip Code 30348		
Purpose of Disbursement Telephone Service Candidate Name LINCOLN DAVIS Category/Type 001		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04		

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

Full Name (Last, First, Middle Initial) A. The Blue Plate		Transaction ID: SB17.18232.6 Date of Disbursement 07 / 25 / 2006
Mailing Address 191 Chestnut Street		Amount of Each Disbursement this Period 220.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Chattanooga	State TN	
Zip Code 37402	Category/Type 003	
Purpose of Disbursement Luncheon		
Candidate Name LINCOLN DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

Full Name (Last, First, Middle Initial) B. South West Air		Transaction ID: SB17.18232.7 Date of Disbursement 07 / 25 / 2006
Mailing Address 2785 Irving Blvd		Amount of Each Disbursement this Period 315.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Dallas	State TX	
Zip Code 75207	Category/Type 002	
Purpose of Disbursement Airfare		
Candidate Name LINCOLN DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

Full Name (Last, First, Middle Initial) C. Exxon Mobile 75		Transaction ID: SB17.18232.9 Date of Disbursement 07 / 26 / 2006
Mailing Address North Main Street		Amount of Each Disbursement this Period 94.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Crossville	State TN	
Zip Code 38555	Category/Type 002	
Purpose of Disbursement Gasoline		
Candidate Name LINCOLN DAVIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 04		

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

Full Name (Last, First, Middle Initial) A. US Post Office		Transaction ID: SB17.18232.14 Date of Disbursement 07 / 28 / 2006	
Mailing Address 2278 Hwy 41S		Amount of Each Disbursement this Period 390.00	
City Nashville State TN Zip Code 37201	Purpose of Disbursement Postage Candidate Name LINCOLN DAVIS	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04			

Full Name (Last, First, Middle Initial) B. Exxon Mobile 75		Transaction ID: SB17.18232.15 Date of Disbursement 07 / 30 / 2006	
Mailing Address North Main Street		Amount of Each Disbursement this Period 38.64	
City Crossville State TN Zip Code 38555	Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 002 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04			

Full Name (Last, First, Middle Initial) C. Applebees		Transaction ID: SB17.18232.16 Date of Disbursement 07 / 30 / 2006	
Mailing Address 1311 Smithville Hwy		Amount of Each Disbursement this Period 44.00	
City McMinnville State TN Zip Code 37110	Purpose of Disbursement Luncheon Candidate Name LINCOLN DAVIS	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04			

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. Shell Oil Full Name (Last, First, Middle Initial) 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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.18232.17 Date of Disbursement 07 / 30 / 2006 Amount of Each Disbursement this Period 59.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
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B. Prater's BBQ Full Name (Last, First, Middle Initial) Mailing Address 9915 Manchester Hwy City Manchester State TN Zip Code 37110 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 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.18232.18 Date of Disbursement 08 / 02 / 2006 Amount of Each Disbursement this Period 21.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
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C. US Post Office Full Name (Last, First, Middle Initial) 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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB17.18232.20 Date of Disbursement 08 / 02 / 2006 Amount of Each Disbursement this Period 390.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
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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

Full Name (Last, First, Middle Initial) A. Exxon Mobile 75		Transaction ID: SB17.18232.25 Date of Disbursement 08 / 05 / 2006	
Mailing Address North Main Street		Amount of Each Disbursement this Period 77.59	
City Crossville State TN Zip Code 38555	Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Staples Office Supply		Transaction ID: SB17.18232.26 Date of Disbursement 08 / 11 / 2006	
Mailing Address 2547 N. Main Street		Amount of Each Disbursement this Period 814.32	
City Crossville State TN Zip Code 38555	Purpose of Disbursement Office Equip Candidate Name LINCOLN DAVIS Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. South West Air		Transaction ID: SB17.18232.27 Date of Disbursement 08 / 12 / 2006	
Mailing Address 2785 Irving Blvd		Amount of Each Disbursement this Period 315.10	
City Dallas State TX Zip Code 75207	Purpose of Disbursement Airfare Candidate Name LINCOLN DAVIS Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <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

<p>A. Shell Oil</p> <p>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>Transaction ID: SB17.18232.28</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="65.00"/></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>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type: 002</p>		

<p>B. Verizon Wireless</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 105378</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement Telephone Service</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>Transaction ID: SB17.18232.29</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="144.20"/></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>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type: 001</p>		

<p>C. Office Depot #210</p> <p>Full Name (Last, First, Middle Initial) Office Depot #210</p> <p>Mailing Address 4504 Harding Road</p> <p>City Nashville State TN Zip Code 37205</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>Transaction ID: SB17.18232.30</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="261.38"/></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>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type: 001</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></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 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

Full Name (Last, First, Middle Initial) A. VISA		Transaction ID: SB17.18233	
Mailing Address PO Box 30131		Date of Disbursement 09 / 28 / 2006	
City Tampa	State FL	Zip Code 33630	Amount of Each Disbursement this Period 5083.82
Purpose of Disbursement Travel Expense		Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

Full Name (Last, First, Middle Initial) B. Electronic Express		Transaction ID: SB17.18233.2	
Mailing Address 596A South Jefferson Ave		Date of Disbursement 08 / 09 / 2006	
City Cookeville	State TN	Zip Code 38501	Amount of Each Disbursement this Period 493.86
Purpose of Disbursement Office Equip		Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. O'Charles Restaurant		Transaction ID: SB17.18233.3	
Mailing Address 1401 Interstate Drive		Date of Disbursement 08 / 09 / 2006	
City Cookeville	State TN	Zip Code 38501	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement Lunch		Category/Type 003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	5083.82
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. Amoco</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Amoco</p> <p>Mailing Address 716 S. Chancery</p> <p>City Manchester State TN Zip Code 37110</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>Transaction ID: SB17.18233.4</p> <p>Date of Disbursement</p> <p>08 / 10 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>60.51</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>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type: 002</p>		

<p>B. The Hermitage Hotel</p> <p>Full Name (Last, First, Middle Initial)</p> <p>The Hermitage Hotel</p> <p>Mailing Address 231 6th Ave N</p> <p>City Nashville State TN Zip Code 37219</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>Transaction ID: SB17.18233.5</p> <p>Date of Disbursement</p> <p>08 / 10 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>214.93</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>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type: 002</p>		

<p>C. BP Corner Market</p> <p>Full Name (Last, First, Middle Initial)</p> <p>BP Corner Market</p> <p>Mailing Address 6635 Smithville Hwy</p> <p>City Silver Point State TN Zip Code 38582</p> <p>Purpose of Disbursement Gasling</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>Transaction ID: SB17.18233.7</p> <p>Date of Disbursement</p> <p>08 / 13 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>73.28</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>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type: 002</p>		

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

<p>A. New York Grill</p> <p>Full Name (Last, First, Middle Initial) New York Grill</p> <p>Mailing Address 216 E. Main St</p>		<p>Transaction ID: SB17.18233.9</p> <p>Date of Disbursement 08 / 14 / 2006</p>
<p>City McMinnville State TN Zip Code 37110</p> <p>Purpose of Disbursement Lunch</p> <p>Candidate Name LINCOLN DAVIS</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>
<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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Category/Type 003</p>	

<p>B. O'Charlies Restaurant</p> <p>Full Name (Last, First, Middle Initial) O'Charlies Restaurant</p> <p>Mailing Address 1401 Interstate Drive</p>		<p>Transaction ID: SB17.18233.11</p> <p>Date of Disbursement 08 / 15 / 2006</p>
<p>City Cookeville State TN Zip Code 38501</p> <p>Purpose of Disbursement Lunch</p> <p>Candidate Name LINCOLN DAVIS</p>	<p>Amount of Each Disbursement this Period 26.54</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>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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Category/Type 002</p>	

<p>C. Symantec</p> <p>Full Name (Last, First, Middle Initial) Symantec</p> <p>Mailing Address 20330 Stevens Creek Blvd</p>		<p>Transaction ID: SB17.18233.12</p> <p>Date of Disbursement 08 / 16 / 2006</p>
<p>City Cupertino State CA Zip Code 95014</p> <p>Purpose of Disbursement AntiVirus</p> <p>Candidate Name LINCOLN DAVIS</p>	<p>Amount of Each Disbursement this Period 88.08</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>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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Category/Type 001</p>	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

Full Name (Last, First, Middle Initial) A. Exxon Mobile 75		Transaction ID: SB17.18233.13 Date of Disbursement 08 / 16 / 2006	
Mailing Address North Main Street		Amount of Each Disbursement this Period 62.20	
City Crossville State TN Zip Code 38555	Purpose of Disbursement Gasoline Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Amoco		Transaction ID: SB17.18233.15 Date of Disbursement 08 / 16 / 2006	
Mailing Address 716 S. Chancery		Amount of Each Disbursement this Period 71.27	
City Manchester State TN Zip Code 37110	Purpose of Disbursement Gasoline Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vegas Steakhouse		Transaction ID: SB17.18233.16 Date of Disbursement 08 / 16 / 2006	
Mailing Address Hwy 127 North		Amount of Each Disbursement this Period 27.00	
City Crossville State TN Zip Code 38555	Purpose of Disbursement Lunch Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <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

<p>A. Full Name (Last, First, Middle Initial) Jimmy Kelley's</p>		<p>Transaction ID: SB17.18233.17 Date of Disbursement 08 / 17 / 2006</p>	
<p>Mailing Address 217 Louise Avenue</p>		<p>Amount of Each Disbursement this Period 231.00</p>	
<p>City Nashville State TN Zip Code 37203</p>	<p>Purpose of Disbursement Luncheon Candidate Name LINCOLN DAVIS Category/Type 003</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>B. Full Name (Last, First, Middle Initial) Exxon Mobil</p>		<p>Transaction ID: SB17.18233.18 Date of Disbursement 08 / 17 / 2006</p>	
<p>Mailing Address 950 s. Capital St SE</p>		<p>Amount of Each Disbursement this Period 59.50</p>	
<p>City Washington State DC Zip Code 20003</p>	<p>Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Category/Type 002</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>C. Full Name (Last, First, Middle Initial) Staples Office Supply</p>		<p>Transaction ID: SB17.18233.19 Date of Disbursement 08 / 23 / 2006</p>	
<p>Mailing Address 2547 N. Main Street</p>		<p>Amount of Each Disbursement this Period 212.43</p>	
<p>City Crossville State TN Zip Code 38555</p>	<p>Purpose of Disbursement Office Supplies Candidate Name LINCOLN DAVIS Category/Type 001</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

<p>A. Amoco</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 716 S. Chancery</p>		<p>Transaction ID: SB17.18233.21 Date of Disbursement 08 / 25 / 2006</p>
<p>City Manchester State TN Zip Code 37110</p>	<p>Purpose of Disbursement Gasoline</p>	<p>Amount of Each Disbursement this Period 56.00</p>
<p>Candidate Name LINCOLN DAVIS</p>	<p>Category/Type 002</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>B. Cancun Mexican Restaurant</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 1282 N Main Drive</p>		<p>Transaction ID: SB17.18233.23 Date of Disbursement 08 / 26 / 2006</p>
<p>City Crossville State TN Zip Code 38555</p>	<p>Purpose of Disbursement Lunch</p>	<p>Amount of Each Disbursement this Period 43.15</p>
<p>Candidate Name LINCOLN DAVIS</p>	<p>Category/Type 002</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p>C. Ruth's Family Restaurant</p> <p>Full Name (Last, First, Middle Initial) Mailing Address North Main Street</p>		<p>Transaction ID: SB17.18233.26 Date of Disbursement 08 / 28 / 2006</p>
<p>City Jamestown State TN Zip Code 38556</p>	<p>Purpose of Disbursement Luncheon</p>	<p>Amount of Each Disbursement this Period 243.50</p>
<p>Candidate Name LINCOLN DAVIS</p>	<p>Category/Type 003</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

Full Name (Last, First, Middle Initial) A. Shell Oil		Transaction ID: SB17.18233.27 Date of Disbursement 08 / 28 / 2006	
Mailing Address 2800 Opryland Drive		Amount of Each Disbursement this Period 63.00	
City Nashville State TN Zip Code 37206	Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Staples Office Supply		Transaction ID: SB17.18233.28 Date of Disbursement 08 / 29 / 2006	
Mailing Address 2547 N. Main Street		Amount of Each Disbursement this Period 883.38	
City Crossville State TN Zip Code 38555	Purpose of Disbursement Office Equipment Candidate Name LINCOLN DAVIS Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. BP Oil		Transaction ID: SB17.18233.29 Date of Disbursement 08 / 30 / 2006	
Mailing Address 600 Allardt Hwy		Amount of Each Disbursement this Period 62.68	
City Jamestown State TN Zip Code 38556	Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <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

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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

Full Name (Last, First, Middle Initial) A. O'Charles Restaurant		Transaction ID: SB17.18233.30 Date of Disbursement 08 / 30 / 2006	
Mailing Address 1401 Interstate Drive		Amount of Each Disbursement this Period 60.00	
City Cookeville State TN Zip Code 38501	Purpose of Disbursement Luncheon Candidate Name LINCOLN DAVIS Category/Type 003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. US Post Office		Transaction ID: SB17.18233.31 Date of Disbursement 08 / 30 / 2006	
Mailing Address 2278 Hwy 41S		Amount of Each Disbursement this Period 585.00	
City Nashville State TN Zip Code 37201	Purpose of Disbursement Postage Candidate Name LINCOLN DAVIS Category/Type 003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Amoco		Transaction ID: SB17.18233.32 Date of Disbursement 08 / 30 / 2006	
Mailing Address 716 S. Chancery		Amount of Each Disbursement this Period 49.50	
City Manchester State TN Zip Code 37110	Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <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

<p>A. Full Name (Last, First, Middle Initial) Oceanaire Washington</p> <p>Mailing Address 1201 F Street NW</p> <p>City Washington State DC Zip Code 20004</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 State: TN District: 04</p>		<p>Transaction ID: SB17.18233.34</p> <p>Date of Disbursement 08 / 31 / 2006</p> <p>Amount of Each Disbursement this Period 252.74</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>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type 002</p>

<p>B. Full Name (Last, First, Middle Initial) Exxon Mobil</p> <p>Mailing Address 950 s. Capital St SE</p> <p>City Washington State DC Zip Code 20003</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>Transaction ID: SB17.18233.35</p> <p>Date of Disbursement 08 / 31 / 2006</p> <p>Amount of Each Disbursement this Period 50.99</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>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type 002</p>

<p>C. Full Name (Last, First, Middle Initial) South West Air</p> <p>Mailing Address 2785 Irving Blvd</p> <p>City Dallas State TX Zip Code 75207</p> <p>Purpose of Disbursement Airfare</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>Transaction ID: SB17.18233.37</p> <p>Date of Disbursement 08 / 31 / 2006</p> <p>Amount of Each Disbursement this Period 315.10</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>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type 002</p>

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Lincoln Davis for Congress

Full Name (Last, First, Middle Initial) A. Exxon Mobile 75		Transaction ID: SB17.18233.38 Date of Disbursement 09 / 02 / 2006	
Mailing Address North Main Street		Amount of Each Disbursement this Period 42.67	
City Crossville State TN Zip Code 38555	Purpose of Disbursement Gasoline Candidate Name LINCOLN DAVIS Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Justin Walling		Transaction ID: SB17.18197 Date of Disbursement 09 / 15 / 2006	
Mailing Address PO Box 808		Amount of Each Disbursement this Period 194.39	
City Spencer State TN Zip Code 38583	Purpose of Disbursement Reimburse Mileage Expense Candidate Name LINCOLN DAVIS Category/Type 002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. WCDDT-AM		Transaction ID: SB17.18202 Date of Disbursement 09 / 25 / 2006	
Mailing Address 1201 S. Colleg St		Amount of Each Disbursement this Period 180.00	
City Winchester State TN Zip Code 37398	Purpose of Disbursement Air Time Candidate Name LINCOLN DAVIS Category/Type 004	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	374.39
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 78 / 83

<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

Full Name (Last, First, Middle Initial)

A. Whitt's BBQ

Mailing Address 2206A Madison Street

City State Zip Code
Clarksville TN 37043

Purpose of Disbursement
Catering Event

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2006
 Primary General
 Other (specify) ▼

003
Category/
Type

Transaction ID: SB17.18119

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

896.53

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

SUBTOTAL of Disbursements This Page (optional)

896.53

TOTAL This Period (last page this line number only)

124929.44

**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)
BOB CASEY FOR PENNSYLVANIA COMMITTEE

Mailing Address PO BOX 22469

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement
Political Contribution

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: PA District: 00

Disbursement For: 2006
 Primary General
 Other (specify) ▼

012
Category/
Type

Transaction ID: SB21.18139

Date of Disbursement

07 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

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

B. Full Name (Last, First, Middle Initial)
Committee to Elect Gary Seale

Mailing Address PO Box 103

City Jacksboro State TN Zip Code 37757

Purpose of Disbursement

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2006
 Primary General
 Other (specify) ▼

012
Category/
Type

Transaction ID: SB21.18127

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

1000.00

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

C. 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
Excess Campaign Funds

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

State: TN District: 04

Disbursement For: 2006
 Primary General
 Other (specify) ▼

012
Category/
Type

Transaction ID: SB21.18225

Date of Disbursement

09 / 28 / 2006

Amount of Each Disbursement this Period

40000.00

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

SUBTOTAL of Disbursements This Page (optional) ►

42000.00

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. Fentress County Fair Assoc Full Name (Last, First, Middle Initial) Mailing Address Po Box 325 City Jamestown State TN Zip Code 38556 Purpose of Disbursement Sponsor 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21.18190 Date of Disbursement 09 / 06 / 2006 Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Fentress Flowers Full Name (Last, First, Middle Initial) Mailing Address PO Box 906 City Jamestown State TN Zip Code 38556 Purpose of Disbursement Memorila Gift 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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21.18182 Date of Disbursement 08 / 31 / 2006 Amount of Each Disbursement this Period 92.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. Friends for John Barrow Full Name (Last, First, Middle Initial) Mailing Address PO Box 8166 City Savannah State GA Zip Code 31412 Purpose of Disbursement Political Contribution 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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21.18138 Date of Disbursement 07 / 16 / 2006 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
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SUBTOTAL of Disbursements This Page (optional) ▶	1192.13
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 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

Full Name (Last, First, Middle Initial) A. Parker for Senate		Transaction ID: SB21.18220 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 5113 Fountainhead Drive		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
City Brentwood State TN Zip Code 37027		
Purpose of Disbursement Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	011 Category/Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Partners for Healing		Transaction ID: SB21.18129 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address 109 Blackwell Street		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tullahoma State TN Zip Code 37388		
Purpose of Disbursement Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	012 Category/Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rochelle for Senate		Transaction ID: SB21.18217 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 115 Castle Heights Ave N Suite 205		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
City Lebanon State TN Zip Code 37087		
Purpose of Disbursement Candidate Name LINCOLN DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	011 Category/Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
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

Full Name (Last, First, Middle Initial) A. Seale for State House		Transaction ID: SB21.18222 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address 410 S 25th Street		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	
City LaFollette	State TN		Zip Code 37766
Purpose of Disbursement			011 Category/Type
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

Full Name (Last, First, Middle Initial) B. Sierra Hull BlueGrass Festival		Transaction ID: SB21.18171 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6	
Mailing Address PO Box 447		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	
City Byrdstown	State TN		Zip Code 38549
Purpose of Disbursement Sponsor			012 Category/Type
Candidate Name LINCOLN DAVIS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

Full Name (Last, First, Middle Initial) C. Springer for State Senate		Transaction ID: SB21.18219 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address PO Box 1939		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	
City Spring Hill	State TN		Zip Code 37174
Purpose of Disbursement			011 Category/Type
Candidate Name LINCOLN DAVIS			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District: 04			

SUBTOTAL of Disbursements This Page (optional) ▶	2250.00
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 Conservative Union

Mailing Address 6300 Baum Drive

City Knoxville State TN Zip Code 37919

Purpose of Disbursement
Donation

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: TN District: 04

Transaction ID: SB21.17743

Date of Disbursement

/ /

07 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

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

B. Full Name (Last, First, Middle Initial)
TN DEMOCRATIC HOUSE CAUCUS

Mailing Address 223 Eighth Ave N Suite 200

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Donation

Candidate Name
LINCOLN DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: TN District: 04

Transaction ID: SB21.18227

Date of Disbursement

/ /

09 / 28 / 2006

Amount of Each Disbursement this Period

5000.00

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

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

55942.13