

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Diane Black for Congress

ADDRESS (number and street)

PO Box 1437

Check if different than previously reported. (ACC)

Gallatin

TN

37066-1437

2. FEC IDENTIFICATION NUMBER ▼

C C00472878

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

TN

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Tommy Whittaker

Signature of Treasurer Mr. Tommy Whittaker

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Diane Black 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))....	127621.61	552326.45
(b) Total Contribution Refunds (from Line 20(d)) .....	250.00	6925.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	127371.61	545401.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	67702.66	216129.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	5440.26	5532.07
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	62262.40	210597.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	699231.14	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Diane Black for Congress**

Report Covering the Period: From:  /  /  To:  /  /

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).....	50771.61	188690.61
(ii) Unitemized.....	975.00	5445.00
(iii) TOTAL of contributions from individuals ▶	51746.61	194135.61
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	75875.00	358190.84
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	127621.61	552326.45
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	8977.81
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	5440.26	5532.07
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	50.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	133061.87	566886.33

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	67702.66	216129.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	250.00	6925.00
(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)).....	250.00	6925.00
21. OTHER DISBURSEMENTS .....	5000.00	17000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	72952.66	240054.38

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	639121.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	133061.87
25. SUBTOTAL (add Line 23 and Line 24).....	772183.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	72952.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	699231.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DARRELL D. AKINS**

Mailing Address 102 CREST POINTE LN.

City OAK RIDGE State TN Zip Code 37830-3108

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

Name of Employer AKINS PUBLIC STRATEGIES Occupation FOUNDER/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2013

**Transaction ID : SA11.4937**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT L. ALLEN**

Mailing Address 405 CONCORD DR.

City COOKEVILLE State TN Zip Code 38501-3079

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11.4956**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PAUL E. BAILEY**

Mailing Address P.O. BOX 2998

City COOKEVILLE State TN Zip Code 38502-2998

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

Name of Employer CB TRUCKING Occupation OWNER/PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 06 / 2013

**Transaction ID : SA11.4972**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JACK BELL**

Mailing Address 1333-C WEST MAIN ST.

City State Zip Code  
LEBANON TN 37087-3378

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

Name of Employer Occupation  
BELL COMPANY CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 26 / 2013

**Transaction ID : SA11.4992**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WESLEY THOMAS BRAY**

Mailing Address 311 E SPRING STREET

City State Zip Code  
COOKEVILLE TN 38501-3311

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 28 / 2013

**Transaction ID : SA11.4935**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DON C. BRUCE**

Mailing Address 175 SNUG HARBOR DR.

City State Zip Code  
HENDERSONVILLE TN 37075-4026

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

Name of Employer Occupation  
AMERICAN HOME DESIGN CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.4782**

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

**[MEMO ITEM]**

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DON C. BRUCE**

Mailing Address 175 SNUG HARBOR DR.

City Hendersonville State TN Zip Code 37075-4026

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

Name of Employer AMERICAN HOME DESIGN Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2013

**Transaction ID : SA11.4785**

Amount of Each Receipt this Period  
**-2400.00**

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JOAN W. BRUCE**

Mailing Address 175 SNUG HARBOR DR

City Hendersonville State TN Zip Code 37075-4026

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

Name of Employer SELF-EMPLOYED Occupation COUNSELOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2013

**Transaction ID : SA11.4784**

Amount of Each Receipt this Period  
**2400.00**

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION FROM SPOUSE**

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

Mailing Address 4420 HILHAM RD.

City Cookeville State TN Zip Code 38506-7118

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

Name of Employer SAVE-A-LOT Occupation DIRECTOR OF OPERATIONS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2013

**Transaction ID : SA11.4913**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STEVE COPE**

Mailing Address 110 COURTSIDE LN.

City TULLAHOMA State TN Zip Code 37388-4844

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2013

**Transaction ID : SA11.4939**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. BETHEL G. COX**

Mailing Address 1200 FAIRWAY LN.

City LIVINGSTON State TN Zip Code 38570-2151

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

Name of Employer Occupation  
SELF EMPLOYED HEALTHCARE PROVIDER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2013

**Transaction ID : SA11.4967**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. BRENDA J. CYRUS**

Mailing Address 215 NETTLECARRIER LN.

City MONROE State TN Zip Code 38573-6101

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

Name of Employer Occupation  
N/A HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2013

**Transaction ID : SA11.4965**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT C. DAVIS**

Mailing Address **745 CLARK AVE.**

City **COOKEVILLE** State **TN** Zip Code **38501-2844**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 28 / 2013**

**Transaction ID : SA11.4944**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM L. DUNN**

Mailing Address **1100 WALL AVE.**

City **COOKEVILLE** State **TN** Zip Code **38501-4249**

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

Name of Employer **CUMBERLAND AUTO CENTER** Occupation **AUTO DEALER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 14 / 2013**

**Transaction ID : SA11.4919**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD W. DYCUS D.D.S.**

Mailing Address **390 S LOWE AVE, STE G**

City **COOKEVILLE** State **TN** Zip Code **38501-4703**

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

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 28 / 2013**

**Transaction ID : SA11.4936**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

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

**3750.00**

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

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

FOR LINE NUMBER: PAGE 10 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT B. EBERSOLE**  
 Mailing Address 500 WINDROWE DR.  
 City State Zip Code  
 COOKEVILLE TN 38506-4223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ELOM, INC. PRESIDENT  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 28 2013  
**Transaction ID : SA11.4932**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JIM EVANS**  
 Mailing Address 741 JAMESTOWN HWY.  
 City State Zip Code  
 LIVINGSTON TN 38570-8607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 FIRST NATIONAL BANK OF TENNESSEE LENDING TEAM  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 06 2013  
**Transaction ID : SA11.4974**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GARRY M. FLOETER**  
 Mailing Address 347 E STEVENS ST.  
 City State Zip Code  
 COOKEVILLE TN 38501-3541  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 COOKEVILLE HEATING & COOLING CORPORATE OFFICER  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 14 2013  
**Transaction ID : SA11.4914**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN FOUSHEE**

Mailing Address 100 FIVE OAKS CIRCLE

City LEBANON State TN Zip Code 37087-1347

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

Name of Employer FIVE OAKS HOMEOWNERS ASSOCIATION Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 11 / 2013

**Transaction ID : SA11.4979**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SHERRY J. GENTRY**

Mailing Address 2373 BURGESS FALLS RD.

City COOKEVILLE State TN Zip Code 38506-5697

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11.4960**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS GREENO**

Mailing Address 205 KEENE VALLEY N

City HENDERSONVILLE State TN Zip Code 37075-4594

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

Name of Employer GREENOCPA Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

**Transaction ID : SA11.4874**

Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS GREENO**

Mailing Address 205 KEENE VALLEY N

City Hendersonville State TN Zip Code 37075-4594

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

Name of Employer GREENOCPA Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2013

**Transaction ID : SA11.4920**

Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM F. HAGERTY**

Mailing Address 4362 CHICKERING LN.

City Nashville State TN Zip Code 37215-4918

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

Name of Employer STATE OF TENNESSEE Occupation COMMISSIONER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11.4950**

Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

SEE REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. CHRISTINE L. HAGERTY**

Mailing Address 4362 CHICKERING LN.

City Nashville State TN Zip Code 37215-4918

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11.4963**

Amount of Each Receipt this Period  
 2400.00  
 CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION FROM SPOUSE

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

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

5050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM F. HAGERTY**

Mailing Address 4362 CHICKERING LN.

City: NASHVILLE State: TN Zip Code: 37215-4918

FEC ID number of contributing federal political committee: C

Name of Employer: STATE OF TENNESSEE Occupation: COMMISSIONER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 09 / 03 / 2013

**Transaction ID : SA11.4950B**

Amount of Each Receipt this Period: -2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**JAMES N. HALL**

Mailing Address 1330 S MAPLE AVE.

City: COOKEVILLE State: TN Zip Code: 38506-6203

FEC ID number of contributing federal political committee: C

Name of Employer: N/A Occupation: RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 28 / 2013

**Transaction ID : SA11.4946**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. LARRY HEAD**

Mailing Address P.O. BOX 468

City: CELINA State: TN Zip Code: 38551-0468

FEC ID number of contributing federal political committee: C

Name of Employer: HEAD EQUIPMENT Occupation: MANAGEMENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 06 / 2013

**Transaction ID : SA11.4970**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD HENLEY**

Mailing Address 106 E FORT STREET

City: MANCHESTER State: TN Zip Code: 37355-1509

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

Name of Employer: HENLEY PROPANE Occupation: OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 28 / 2013

**Transaction ID : SA11.4941**

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN HOUSER**

Mailing Address 397 TERRAPIN RIDGE R.

City: LIVINGSTON State: TN Zip Code: 38570-5106

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

Name of Employer: N/A Occupation: RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 06 / 2013

**Transaction ID : SA11.4968**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. TIM HUDDLESTON**

Mailing Address 7719 LILLYS CHAPEL ROAD

City: BAXTER State: TN Zip Code: 38544-4513

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

Name of Employer: W & O CONSTRUCTION Occupation: ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 22 / 2013

**Transaction ID : SA11.4926**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD ALLEN ISAACSON**

Mailing Address 755 PLANTATION BLVD.

City State Zip Code  
GALLATIN TN 37066-7401

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

Name of Employer Occupation  
SERVPRO OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 17 / 2013

**Transaction ID : SA11.4723**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. KRISTINE ISAACSON**

Mailing Address 755 PLANTATION BLVD.

City State Zip Code  
GALLATIN TN 37066-7401

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

Name of Employer Occupation  
SERVPRO INDUSTRIES EXECUTIVE VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2013

**Transaction ID : SA11.4894**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD ALLEN ISAACSON**

Mailing Address 755 PLANTATION BLVD.

City State Zip Code  
GALLATIN TN 37066-7401

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

Name of Employer Occupation  
SERVPRO OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2013

**Transaction ID : SA11.4895**

Amount of Each Receipt this Period  
-100.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 16 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD ALLEN ISAACSON**

Mailing Address 755 PLANTATION BLVD.

City State Zip Code  
GALLATIN TN 37066-7401

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

Name of Employer Occupation  
SERVPRO OWNER

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2013

**Transaction ID : SA11.4895B**

Amount of Each Receipt this Period  
 -100.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD ALLEN ISAACSON**

Mailing Address 755 PLANTATION BLVD.

City State Zip Code  
GALLATIN TN 37066-7401

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

Name of Employer Occupation  
SERVPRO OWNER

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2013

**Transaction ID : SA11.4898**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOEY A. JACOBS**

Mailing Address 9229 HUNTERBORO DR.

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
ACADIA HEALTHCARE CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2013

**Transaction ID : SA11.4928**

Amount of Each Receipt this Period  
 5200.00

CONTRIBUTION

SEE REATTRIBUTION

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

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

5200.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. DEBORAH H. JACOBS**

Mailing Address 9229 HUNTERBORO DR.

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
N/A HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 28 / 2013

**Transaction ID : SA11.4948**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION FROM SPOUSE**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOEY A. JACOBS**

Mailing Address 9229 HUNTERBORO DR.

City State Zip Code  
BRENTWOOD TN 37027-6104

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

Name of Employer Occupation  
ACADIA HEALTHCARE CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 28 / 2013

**Transaction ID : SA11.4928B**

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

**C.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS H. JONES**

Mailing Address 800 DRY VALLEY RD.

City State Zip Code  
COOKEVILLE TN 38506-4940

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

Name of Employer Occupation  
RESEARCH ELECTRONICS INTERNATIONAL OWNER/ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 28 / 2013

**Transaction ID : SA11.4933**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COL. MAXIMILIAN LAMONT**

Mailing Address **207 REGWOOD DR.**

City **TULLAHOMA** State **TN** Zip Code **37388-5334**

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

Name of Employer **N/A** Occupation **RETIRED USAF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 03 / 2013**

**Transaction ID : SA11.4958**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **1 EDWARDS WAY**

City **IRVINE** State **CA** Zip Code **92614-5688**

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

Name of Employer **PUBLIC AFFAIRS** Occupation **CORPORATE V.P.**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **221.61**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**07 / 17 / 2013**

**Transaction ID : SA11.4901**

Amount of Each Receipt this Period  
**221.61**  
 CONTRIBUTION  
 IN KIND-FOOD/BEVERAGE

**C.** Full Name (Last, First, Middle Initial)  
**MRS. KRISTI M. LENART**

Mailing Address **375 ABBY CT**

City **COOKEVILLE** State **TN** Zip Code **38506-5495**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 29 / 2013**

**Transaction ID : SA11.4997**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**721.61**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THERESA LOTT**

Mailing Address 102 HERITAGE DR.

City State Zip Code  
WHITE HOUSE TN 37188-9254

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

Name of Employer Occupation  
EXPRESS UR WAY OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2013

**Transaction ID : SA11.4912**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RAY E. MARCROM**

Mailing Address 1277 MCARTHUR ST.

City State Zip Code  
MANCHESTER TN 37355-2423

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

Name of Employer Occupation  
MARCROM'S PHARMACY PHARMACIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11.4957**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES T. MARTIN**

Mailing Address 1430 JAMESTOWN CT.

City State Zip Code  
COOKEVILLE TN 38501-3072

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

Name of Employer Occupation  
N/A RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2013

**Transaction ID : SA11.4945**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BEVERLY MCKENZIE**

Mailing Address 1110 PLANTATION BLVD.

City: GALLATIN State: TN Zip Code: 37066-4494

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

Name of Employer: MCKENZIE JEWELERS Occupation: OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 07 / 24 / 2013

**Transaction ID : SA11.4891B**

Amount of Each Receipt this Period: -100.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MRS. BEVERLY MCKENZIE**

Mailing Address 1110 PLANTATION BLVD.

City: GALLATIN State: TN Zip Code: 37066-4494

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

Name of Employer: MCKENZIE JEWELERS Occupation: OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 07 / 24 / 2013

**Transaction ID : SA11.4893**

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

Mailing Address 1110 PLANTATION BLVD.

City: GALLATIN State: TN Zip Code: 37066-4494

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

Name of Employer: INFORMATION REQUESTED PER BEST EFF( Occupation: INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 625.00

Date of Receipt: 06 / 17 / 2013

**Transaction ID : SA11.4718**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**[MEMO ITEM]**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BEVERLY MCKENZIE**

Mailing Address 1110 PLANTATION BLVD.

City State Zip Code  
GALLATIN TN 37066-4494

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

Name of Employer Occupation  
MCKENZIE JEWELERS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 24 / 2013

**Transaction ID : SA11.4891**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REATTRIBUTION FROM SPOUSE

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

Mailing Address 1110 PLANTATION BLVD.

City State Zip Code  
GALLATIN TN 37066-4494

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
625.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 24 / 2013

**Transaction ID : SA11.4892**

Amount of Each Receipt this Period  
-100.00

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

Mailing Address PO BOX 939

City State Zip Code  
COOKEVILLE TN 38503-0939

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

Name of Employer Occupation  
HUGH E BAILEY AND ASSOCIATES CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 28 / 2013

**Transaction ID : SA11.4938**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STAN MCNABB**

Mailing Address 100 CHERRY SPRINGS

City TULLAHOMA State TN Zip Code 37388-5379

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

Name of Employer STAN MCNABB AUTOMOTIVE FAMILY Occupation AUTOMOTIVE BUSINESS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

**Transaction ID : SA11.4897**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MARTIN L. MEDLEY JR.**

Mailing Address 848 N WASHINGTON AVE.

City COOKEVILLE State TN Zip Code 38501-2674

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11.4962**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DR. STEPHEN M. NEELY M.D.**

Mailing Address 169 POWELL GROVE RD.

City LEBANON State TN Zip Code 37090-2808

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

Name of Employer TENNESSEE ORTHOPAEDICS Occupation ORTHOPAEDIC SURGEON

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 11 / 2013

**Transaction ID : SA11.4980**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MIKE NIEDERHAUSER**

Mailing Address **280 WESTWOOD COURT**

City **ESTILL SPRINGS** State **TN** Zip Code **37330-3435**

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

Name of Employer **MIKE NIEDERHAUSER RENTAL** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 16 / 2013**

**Transaction ID : SA11.4982**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES DAVID OWEN**

Mailing Address **104 STUART DR.**

City **HENDERSONVILLE** State **TN** Zip Code **37075-4318**

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

Name of Employer **NASTC, INC** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2725.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 17 / 2013**

**Transaction ID : SA11.4720**

Amount of Each Receipt this Period  
**125.00**  
 CONTRIBUTION

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**JAMES DAVID OWEN**

Mailing Address **104 STUART DR.**

City **HENDERSONVILLE** State **TN** Zip Code **37075-4318**

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

Name of Employer **NASTC, INC** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2725.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 17 / 2013**

**Transaction ID : SA11.4720B**

Amount of Each Receipt this Period  
**-100.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 REDESIGNATION TO GENERAL

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

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

**1000.00**

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

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

FOR LINE NUMBER: PAGE 24 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES DAVID OWEN**

Mailing Address 104 STUART DR.

City Hendersonville State TN Zip Code 37075-4318

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

Name of Employer NASTC, INC Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2725.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 17 / 2013

**Transaction ID : SA11.4885**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**L. G. PUCKETT III**

Mailing Address 1125 WEST MAIN ST.

City Livingston State TN Zip Code 38570-2204

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

Name of Employer PUCKETT'S FURNITURE & APPLIANCE Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2013

**Transaction ID : SA11.4976**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DR. L. G. PUCKETT IV**

Mailing Address 508 N CHURCH ST.

City Livingston State TN Zip Code 38570-1539

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

Name of Employer SELF-EMPLOYED Occupation DENTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2013

**Transaction ID : SA11.4966**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

1250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WESLEY A. PUCKETT**

Mailing Address 422 WOODLAND ST.

City: LIVINGSTON State: TN Zip Code: 38570-1342

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

Name of Employer: PUCKETT'S FURNITURE & APPLIANCE Occupation: BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 06 / 2013

**Transaction ID : SA11.4975**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ALLEN RAY**

Mailing Address 575 N PICKARD AVE.

City: COOKEVILLE State: TN Zip Code: 38501-2936

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

Name of Employer: BB&T INSURANCE SERVICES Occupation: INSURANCE MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 03 / 2013

**Transaction ID : SA11.4954**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KAREN K. RICE**

Mailing Address 1038 CARTER BLAKE RD.

City: TULLAHOMA State: TN Zip Code: 37388-5020

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

Name of Employer: CFC TRANSPORT Occupation: OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 28 / 2013

**Transaction ID : SA11.4943**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN ROBERTS**

Mailing Address **2747 HILLSBORO BLVD**

City **MANCHESTER** State **TN** Zip Code **37355-6540**

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

Name of Employer **JOHN ROBERTS AUTO GROUP** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 20 / 2013**

**Transaction ID : SA11.4921**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PATTY HOUSER SMITH**

Mailing Address **416 O'NEAL RD.**

City **LIVINGSTON** State **TN** Zip Code **38570-6110**

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

Name of Employer **N/A** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 06 / 2013**

**Transaction ID : SA11.4973**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. TIMOTHY JOHN SMITH**

Mailing Address **416 O'NEAL RD.**

City **LIVINGSTON** State **TN** Zip Code **38570-6110**

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

Name of Employer **BEST BUMPER PARTS SERVICE** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 06 / 2013**

**Transaction ID : SA11.4969**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PAUL STUMB**

Mailing Address 515 W. SPRING ST.

City: LEBANON State: TN Zip Code: 37087-3429

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

Name of Employer: CUMBERLAND UNIVERSITY Occupation: PROFESSOR & DEAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 24 / 2013

**Transaction ID : SA11.4927**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JOYCE E. SWALLOWS**

Mailing Address 1335 CHATSWORTH BLVD.

City: COOKEVILLE State: TN Zip Code: 38501-5805

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

Name of Employer: SWALLOWS INSURANCE AGENCY Occupation: INSURANCE AGENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 03 / 2013

**Transaction ID : SA11.4955**

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. KENT J. THIRY**

Mailing Address 1400 E. OXFORD LANE

City: CHERRY HILLS VILLAGE State: CO Zip Code: 80113-4834

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

Name of Employer: DAVITA Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1750.00

Date of Receipt: 07 / 22 / 2013

**Transaction ID : SA11.4888**

Amount of Each Receipt this Period: 1750.00

CONTRIBUTION

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MS. RACHEL RENEE WELCH**

Mailing Address 4948 BEN JARED RD.

City	State	Zip Code
BAXTER	TN	38544-4527

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

Name of Employer	Occupation
SOUTHERN HILLS GOLF AND COUNTRY CL	OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2013

**Transaction ID : SA11.4931**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MARK A. WILLIAMS**

Mailing Address 330 WILLOWBROOK DR.

City	State	Zip Code
MANCHESTER	TN	37355-3884

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

Name of Employer	Occupation
WILLIAMS AND STANFORD	LAWYER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2013

**Transaction ID : SA11.4940**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 248 HIDDEN HAVEN LN.

City	State	Zip Code
MANCHESTER	TN	37355-6586

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

Name of Employer	Occupation
LKQ OF TENNESSEE	PLANT MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2013

**Transaction ID : SA11.4993**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES P. WRIGHT**

Mailing Address **PO BOX 27**

City **COOKEVILLE** State **TN** Zip Code **38503-0027**

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

Name of Employer **PHOENIX USA, INC.** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 / 28 / 2013**

**Transaction ID : SA11.4934**

Amount of Each Receipt this Period  
**2000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JANICE M. WRIGHT**

Mailing Address **1330 CHATSWORTH BLVD.**

City **COOKEVILLE** State **TN** Zip Code **38501-5800**

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

Name of Employer **N/A** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 / 28 / 2013**

**Transaction ID : SA11.4947**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RAFFANIELLO & ASSOCIATES, LLC**

Mailing Address **325 SEVENTH STREET NW, STE 400**

City **WASHINGTON** State **DC** Zip Code **20004-2834**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**07 / 15 / 2013**

**Transaction ID : SA11.4879**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

SEE ATTRIBUTION BELOW

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

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

**2750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PATRICK RAFFANIELLO**

Mailing Address 1009 NEW YORK AVE NW, STE 625

City State Zip Code  
WASHINGTON DC 20001-4406

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

Name of Employer Occupation  
RAFFANIELLO & ASSOCIATES GOVERNMENT CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1044.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 17 / 2013

**Transaction ID : SA11.4881**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**SOUTHLAND CONSTRUCTORS, LLC**

Mailing Address 1587 MALLORY LN, STE 100

City State Zip Code  
BRENTWOOD TN 37027-2824

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : SA11.4805**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**[MEMO ITEM]**  
SEE ATTRIBUTION BELOW

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

Mailing Address 2659 S MOUNT PLEASANT RD

City State Zip Code  
GREENBRIER TN 37073-4863

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

Name of Employer Occupation  
SOUTHLAND CONTRACTORS, LLC PROJECT MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 08 / 2013

**Transaction ID : SA11.4825**

Amount of Each Receipt this Period  
650.00

CONTRIBUTION

**[MEMO ITEM]**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MATT ARNETT**

Mailing Address 2659 S MOUNT PLEASANT RD

City GREENBRIER State TN Zip Code 37073-4863

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

Name of Employer SOUTHLAND CONTRACTORS, LLC Occupation PROJECT MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11.4829**

Amount of Each Receipt this Period  
600.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 1587 MALLORY LN, STE 100

City BRENTWOOD State TN Zip Code 37027-2824

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

Name of Employer SOUTHLAND CONTRACTORS, LLC Occupation PROJECT MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11.4823**

Amount of Each Receipt this Period  
650.00

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address 1587 MALLORY LN, STE 100

City BRENTWOOD State TN Zip Code 37027-2824

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

Name of Employer SOUTHLAND CONTRACTORS, LLC Occupation PROJECT MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11.4827**

Amount of Each Receipt this Period  
600.00

CONTRIBUTION

**[MEMO ITEM]**

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

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

0.00

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

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

FOR LINE NUMBER: PAGE 32 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER R. KIRKLAND**

Mailing Address 203 THORNHILL CRESCENT

City State Zip Code  
BRENTWOOD TN 37027-4879

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

Name of Employer Occupation  
SOUTHLAND CONTRACTORS, LLC PARTNER/SECRETARY

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11.4824**

Amount of Each Receipt this Period  
 650.00

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER R. KIRKLAND**

Mailing Address 203 THORNHILL CRESCENT

City State Zip Code  
BRENTWOOD TN 37027-4879

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

Name of Employer Occupation  
SOUTHLAND CONTRACTORS, LLC PARTNER/SECRETARY

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11.4828**

Amount of Each Receipt this Period  
 600.00

CONTRIBUTION

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**SAMUEL CLAY STACKER**

Mailing Address 1587 MALLORY LN, STE 100

City State Zip Code  
BRENTWOOD TN 37027-2824

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

Name of Employer Occupation  
SOUTHLAND CONTRACTORS, LLC GENERAL CONTRACTOR

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11.4826**

Amount of Each Receipt this Period  
 650.00

CONTRIBUTION

**[MEMO ITEM]**

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

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

0.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SAMUEL CLAY STACKER**

Mailing Address 1587 MALLORY LN, STE 100

City BRENTWOOD	State TN	Zip Code 37027-2824
-------------------	-------------	------------------------

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

Name of Employer SOUTHLAND CONTRACTORS, LLC	Occupation GENERAL CONTRACTOR
--	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11.4830**

Amount of Each Receipt this Period  
600.00

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**SOUTHLAND CONSTRUCTORS, LLC**

Mailing Address 1587 MALLORY LN, STE 100

City BRENTWOOD	State TN	Zip Code 37027-2824
-------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11.4805B**

Amount of Each Receipt this Period  
-2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**SOUTHLAND CONSTRUCTORS, LLC**

Mailing Address 1587 MALLORY LN, STE 100

City BRENTWOOD	State TN	Zip Code 37027-2824
-------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2013

**Transaction ID : SA11.4805C**

Amount of Each Receipt this Period  
2400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 61
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STEWART INVESTMENT, LLC**

Mailing Address **7790B HIGHWAY 109 N**

City **LEBANON** State **TN** Zip Code **37087-0511**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 11 / 2013**

**Transaction ID : SA11.4981**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

SEE ATTRIBUTION BELOW

**B.** Full Name (Last, First, Middle Initial)  
**MR. DANNY STEWART**

Mailing Address **19 DANA DR.**

City **LEBANON** State **TN** Zip Code **37087-7594**

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

Name of Employer Occupation  
**ADVANCED PROPANE, INC. CO-OWNER/COO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11.4987**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**[MEMO ITEM]**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**1000.00**

**50771.61**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A. ADVANCED MEDICAL TECHNOLOGY ASSN, PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 PENNSYLVANIA AVE NW, STE 800

City WASHINGTON	State DC	Zip Code 20004-2654
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00340356

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2013

**Transaction ID : SA11.4880**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 CONTRIBUTION

**B. AETNA INC. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 F STREET NW, SUITE 350

City WASHINGTON	State DC	Zip Code 20001-6706
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00181826

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11.5003**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 CONTRIBUTION

**C. AFLAC INC PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1932 WYNNNTON RD.

City COLUMBUS	State GA	Zip Code 31999-0001
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2013

**Transaction ID : SA11.4984**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00  
 CONTRIBUTION

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

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

\_\_\_\_\_ 3000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AGSH&F CIVIC ACTION COMMITTEE PAC**

Mailing Address 1333 NEW HAMPSHIRE AVE. NW

City State Zip Code  
WASHINGTON DC 20036-1500

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1375.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 03 / 2013

**Transaction ID : SA11.4952**

Amount of Each Receipt this Period  
375.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF ORTHODONTISTS PAC-AAOPAC**

Mailing Address 401 NORTH LINDBERGH BLVD.

City State Zip Code  
ST. LOUIS MO 63141-7839

FEC ID number of contributing federal political committee. **C** C00293910

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2013

**Transaction ID : SA11.5006**

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL ASSOCIATION PAC**

Mailing Address 1111-14TH STREET NW, STE 1100

City State Zip Code  
WASHINGTON DC 20005-5627

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 06 / 2013

**Transaction ID : SA11.4971**

Amount of Each Receipt this Period  
1500.00  
CONTRIBUTION

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

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

6875.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AUTOMOTIVE FREE INTERNATIONAL TRADE PAC**

Mailing Address 1625 PRINCE STREET, STE. 225

City State Zip Code  
ALEXANDRIA VA 22314-2882

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

**Transaction ID : SA11.4889**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL PAC**

Mailing Address ONE COMCAST CENTER, 1701 JFK BOULE

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2013

**Transaction ID : SA11.4904**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL PAC**

Mailing Address ONE COMCAST CENTER, 1701 JFK BOULE

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2013

**Transaction ID : SA11.4905**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CRACKER BARREL OLD COUNTRY STORE INC. PAC**

Mailing Address **PO BOX 787**

City **LEBANON** State **TN** Zip Code **37088-0787**

FEC ID number of contributing federal political committee. **C C00252791**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11.4991**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

Mailing Address **ONE EDWARDS WAY**

City **IRVINE** State **CA** Zip Code **92614-5688**

FEC ID number of contributing federal political committee. **C C00411900**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 06 / 2013**

**Transaction ID : SA11.4907**

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ELI LILLY AND COMPANY PAC**

Mailing Address **555 TWELFTH ST NW, STE 650, SOUTH**

City **WASHINGTON** State **DC** Zip Code **20004-1209**

FEC ID number of contributing federal political committee. **C C00082792**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 06 / 2013**

**Transaction ID : SA11.4906**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EVERY REPUBLICAN IS CRUCIAL- ERIC PAC**

Mailing Address **25 E MAIN ST, STE 200**

City **RICHMOND** State **VA** Zip Code **23219-2109**

FEC ID number of contributing federal political committee. **C C00384701**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 / 14 / 2013**

**Transaction ID : SA11.4915**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**5000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GASTROINTESTINAL PAC - GIPAC**

Mailing Address **1020 N FAIRFAX ST, 5TH FLR.**

City **ALEXANDRIA** State **VA** Zip Code **22314-1537**

FEC ID number of contributing federal political committee. **C C00354571**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**08 / 06 / 2013**

**Transaction ID : SA11.4909**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1500.00**

CONTRIBUTION

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

Mailing Address **1 DNA WAY**

City **S. SAN FRANCISCO** State **CA** Zip Code **94080-4918**

FEC ID number of contributing federal political committee. **C C00199257**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 26 / 2013**

**Transaction ID : SA11.4990**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

CONTRIBUTION

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

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

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**7500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN EMPLOYEES PAC**

Mailing Address 2121 CRYSTAL DR, STE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2013

**Transaction ID : SA11.4902**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN EMPLOYEES PAC**

Mailing Address 2121 CRYSTAL DR, STE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2013

**Transaction ID : SA11.4903**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MOTION PICTURE ASSOCIATION OF AMERICA PAC**

Mailing Address 1600 EYE STREET NW

City WASHINGTON State DC Zip Code 20006-4010

FEC ID number of contributing federal political committee. **C C00139519**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2013

**Transaction ID : SA11.4908**

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

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

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

3500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A. NATIONAL ASSOCIATION OF CONVENIENCE STORES (NACSPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 1600 DUKE STREET

City ALEXANDRIA      State VA      Zip Code 22314-3466

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer      Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

**Transaction ID : SA11.4890**

Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**B. NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 2901 TELESTAR COURT

City FALLS CHURCH      State VA      Zip Code 22042-1260

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

Name of Employer      Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11.5000**

Amount of Each Receipt this Period  
 3000.00  
 CONTRIBUTION

**C. NATIONAL HEALTH CORPORATION PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 VINE STREET

City MURFREESBORO      State TN      Zip Code 37130-3734

FEC ID number of contributing federal political committee. **C C00153445**

Name of Employer      Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 28 / 2013

**Transaction ID : SA11.4930**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

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

10500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A. NATIONAL MULTI HOUSING COUNCIL PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1850 M STREET NW, STE 540  
 City WASHINGTON State DC Zip Code 20036-5816  
 FEC ID number of contributing federal political committee. **C C00130773**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : SA11.4983**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**B. NATIONAL RESTAURANT ASSOCIATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2055 L STREET NW  
 City WASHINGTON State DC Zip Code 20036-4983  
 FEC ID number of contributing federal political committee. **C C00003764**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2013  
**Transaction ID : SA11.5002**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C. NEWFIELD PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 WATERWAY SQUARE PL, STE 100  
 City THE WOODLANDS State TX Zip Code 77380-2764  
 FEC ID number of contributing federal political committee. **C C00443523**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 14 / 2013  
**Transaction ID : SA11.4917**  
 Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**OSI RESTAURANT PARTNERS PAC**

Mailing Address 2202 N WEST SHORE BLVD, 5TH FLR.

City TAMPA State FL Zip Code 33607-5747

FEC ID number of contributing federal political committee. **C** C00253153

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2013

**Transaction ID : SA11.4994**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

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

Mailing Address PO BOX 2958

City DANBURY State CT Zip Code 06813-2958

FEC ID number of contributing federal political committee. **C** C00283440

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2013

**Transaction ID : SA11.4978**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PUBLIX SUPER MARKETS, INC. ASSOCIATES PAC**

Mailing Address PO BOX 407

City LAKELAND State FL Zip Code 33802-0407

FEC ID number of contributing federal political committee. **C** C00400705

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11.5001**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

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

Mailing Address 401 N MAIN STREET

City WINSTON SALEM State NC Zip Code 27101-3804

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA11.4953**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Mailing Address 3930 PENDER DR, STE 340

City FAIRFAX State VA Zip Code 22030-0986

FEC ID number of contributing federal political committee. **C** C00120030

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11.5004**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SONY PICTURES ENTERTAINMENT INC. PAC**

Mailing Address 10202 W WASHINGTON BLVD, THALBERG-

City CULVER CITY State CA Zip Code 90232-3119

FEC ID number of contributing federal political committee. **C** C00282038

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 14 / 2013

**Transaction ID : SA11.4918**

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THE BABCOCK & WILSON COMPANY PAC- B&WPAC**

Mailing Address 2016 MT. ATHOS RD.

City LYNCHBURG State VA Zip Code 24504-5447

FEC ID number of contributing federal political committee. **C C00365502**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11.5007**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE WALT DISNEY CO. EMPLOYEES PAC**

Mailing Address 425 3RD STREET SW, STE 1100

City WASHINGTON State DC Zip Code 20024-3227

FEC ID number of contributing federal political committee. **C C00197749**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA11.5008**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TIME WARNER INC. PAC**

Mailing Address 800 CONNECTICUT AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20006-2709

FEC ID number of contributing federal political committee. **C C00339291**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 06 / 2013

**Transaction ID : SA11.4910**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TOM JAMES COMPANY PAC**

Mailing Address 1155 21ST STREET NW, STE 300

City WASHINGTON State DC Zip Code 20036-3312

FEC ID number of contributing federal political committee. **C C00337972**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 20 / 2013

**Transaction ID : SA11.4985**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 9 ROSZEL RD.

City PRINCETON State NJ Zip Code 08540-6205

FEC ID number of contributing federal political committee. **C C00113753**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 14 / 2013

**Transaction ID : SA11.4911**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VANGUARD HEALTH MANAGEMENT INC. PAC**

Mailing Address 20 BURTON HILLS BLVD. STE 100

City NASHVILLE State TN Zip Code 37215-6409

FEC ID number of contributing federal political committee. **C C00380402**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 28 / 2013

**Transaction ID : SA11.4929**

Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VERIZON COMMUNICATIONS INC. GOOD GVT. FUND**

Mailing Address 1300 I STREET NW, 4TH FLR

City WASHINGTON State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 15 / 2013**

**Transaction ID : SA11.4878**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

Mailing Address 1501 M STREET NW, STE 1100

City WASHINGTON State DC Zip Code 20005-1729

FEC ID number of contributing federal political committee. **C C00167759**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 03 / 2013**

**Transaction ID : SA11.4961**

Amount of Each Receipt this Period  
**1500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAMS AND JENSEN PLLC PAC**

Mailing Address 701 8TH STREET NW, STE 500

City WASHINGTON State DC Zip Code 20001-3965

FEC ID number of contributing federal political committee. **C C00039206**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 20 / 2013**

**Transaction ID : SA11.4986**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**YUM! BRANDS, INC. GOOD GOVERNMENT FUND PAC**

Mailing Address 1441 GARDINER LN.

City State Zip Code  
LOUISVILLE KY 40213-1914

FEC ID number of contributing federal political committee. **C** C00329474

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2013

**Transaction ID : SA11.4989**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

75875.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 61
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ON MESSAGE INC**

Mailing Address 2130 PRIEST BRG DR #11

City CROFTON State MD Zip Code 21114-0000

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5440.26

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2013

**Transaction ID : SA14.5000**

Amount of Each Receipt this Period  
5440.26

REFUND- MEDIA

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5440.26

5440.26

**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 50 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. DIRKSEN LEHMAN</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2013	
Mailing Address 1 EDWARDS WAY			Amount of Each Disbursement this Period 221.61	
City IRVINE	State CA	Zip Code 92614-5688	Transaction ID : SB17.500000	
Purpose of Disbursement IN-KIND - FOOD/BEVERAGE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. 1808 GRILLE</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2013	
Mailing Address 1808 WEST END AVE			Amount of Each Disbursement this Period 935.21	
City NASHVILLE	State TN	Zip Code 37203	Transaction ID : SB17.2242	
Purpose of Disbursement FACILITY RENTAL/CATERING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BELLWETHER CONSULTING GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2013	
Mailing Address 1150 HUNGRYNECK BLVD STE C-336			Amount of Each Disbursement this Period 18000.00	
City MOUNT PLEASANT	State SC	Zip Code 29464	Transaction ID : SB17.2245	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19156.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. BELLWETHER CONSULTING GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address 1150 HUNGRYNECK BLVD STE C-336		Amount of Each Disbursement this Period 3000.00
City MOUNT PLEASANT State SC Zip Code 29464	Purpose of Disbursement FINANCE CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.2249
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. BELLWETHER CONSULTING GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 1150 HUNGRYNECK BLVD STE C-336		Amount of Each Disbursement this Period 3000.00
City MOUNT PLEASANT State SC Zip Code 29464	Purpose of Disbursement FINANCE CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.2250
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. BELLWETHER CONSULTING GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013
Mailing Address 1150 HUNGRYNECK BLVD STE C-336		Amount of Each Disbursement this Period 3067.64
City MOUNT PLEASANT State SC Zip Code 29464	Purpose of Disbursement FINANCE CONSULTING/POSTAGE	
Candidate Name	Category/Type	Transaction ID : SB17.2252
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9067.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. BOBBY VANS STEAKHOUSE</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2013	
Mailing Address 1201 NEW YORK AVE NW			Amount of Each Disbursement this Period 1464.39	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SB17.2240	
Purpose of Disbursement FACILITY RENTAL/CATERING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BOBBY VANS STEAKHOUSE</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address 1201 NEW YORK AVE NW			Amount of Each Disbursement this Period 1339.66	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SB17.2241	
Purpose of Disbursement FACILITY RENTAL/CATERING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BROOKE RAINEY PHOTOS</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2013	
Mailing Address 5809 BRENTWOOD TRACE			Amount of Each Disbursement this Period 510.74	
City BRENTWOOD	State TN	Zip Code 37027	Transaction ID : SB17.2258	
Purpose of Disbursement PHOTOGRAPHY SERVICE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3314.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2013
Mailing Address 300 1ST ST SE			Amount of Each Disbursement this Period 874.85 <b>Transaction ID : SB17.2228</b>
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement CATERING	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2013
Mailing Address 300 1ST ST SE			Amount of Each Disbursement this Period 212.18 <b>Transaction ID : SB17.2229</b>
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement CATERING	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2013
Mailing Address 300 1ST ST SE			Amount of Each Disbursement this Period 283.38 <b>Transaction ID : SB17.2232</b>
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement CATERING	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1370.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 61		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2013
Mailing Address 300 1ST ST SE		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB17.2238</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FACILITY RENTAL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. COMMERCE STREET</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2013
Mailing Address PO BOX 330763		Amount of Each Disbursement this Period 956.14 <b>Transaction ID : SB17.2246</b>
City NASHVILLE	State TN	
Zip Code 37203	Purpose of Disbursement FINANCE CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. COMMERCE STREET</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2013
Mailing Address PO BOX 330763		Amount of Each Disbursement this Period 9235.30 <b>Transaction ID : SB17.2247</b>
City NASHVILLE	State TN	
Zip Code 37203	Purpose of Disbursement FINANCE CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10491.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. COMMERCE STREET</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2013
Mailing Address PO BOX 330763		Amount of Each Disbursement this Period 1020.00 <b>Transaction ID : SB17.2248</b>
City NASHVILLE	State TN	
Zip Code 37203	Purpose of Disbursement FINANCE CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. COMMERCE STREET</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address PO BOX 330763		Amount of Each Disbursement this Period 2075.00 <b>Transaction ID : SB17.2251</b>
City NASHVILLE	State TN	
Zip Code 37203	Purpose of Disbursement FINANCE CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. COMPLIANCE CONSULTING LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2013
Mailing Address P.O. BOX 365		Amount of Each Disbursement this Period 1525.00 <b>Transaction ID : SB17.2233</b>
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4620.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. COMPLIANCE CONSULTING LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 05 / 2013</b>
Mailing Address <b>P.O. BOX 365</b>		Amount of Each Disbursement this Period <b>1571.00</b>
City <b>MCLEAN</b>	State <b>VA</b>	
Zip Code <b>22101</b>	Purpose of Disbursement <b>COMPLIANCE CONSULTING/POSTAGE</b>	<b>Transaction ID : SB17.2234</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ELAVON</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2013</b>
Mailing Address <b>7300 CHAPMAN HWY</b>		Amount of Each Disbursement this Period <b>320.99</b>
City <b>KNOXVILLE</b>	State <b>TN</b>	
Zip Code <b>37920</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEES</b>	<b>Transaction ID : SB17.2235</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FIVE OAKS GOLF AND COUNTRY CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 11 / 2013</b>
Mailing Address <b>621 FIVE OAKS BLVD.</b>		Amount of Each Disbursement this Period <b>508.32</b>
City <b>LEBANON</b>	State <b>TN</b>	
Zip Code <b>37087</b>	Purpose of Disbursement <b>FACILITY RENTAL/CATERING</b>	<b>Transaction ID : SB17.2243</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2400.31</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. GRASSROOTS TARGETING</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2013
Mailing Address 814 KING ST STE 420		Amount of Each Disbursement this Period 552.87 <b>Transaction ID : SB17.2274</b>
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement WEB SERVICE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOYNER &amp; HOGAN PRINTERS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2013
Mailing Address PO BOX 60069		Amount of Each Disbursement this Period 655.96 <b>Transaction ID : SB17.2266</b>
City NASHVILLE State TN Zip Code 37206	Purpose of Disbursement PRINTING/POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JOYNER &amp; HOGAN PRINTERS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013
Mailing Address PO BOX 60069		Amount of Each Disbursement this Period 588.80 <b>Transaction ID : SB17.2267</b>
City NASHVILLE State TN Zip Code 37206	Purpose of Disbursement PRINTING/POSTAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1797.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. PATTON BOGGS LLP</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2013	
Mailing Address 2550 M ST NW			Amount of Each Disbursement this Period 2534.00	
City WASHINGTON	State DC	Zip Code 20037	Transaction ID : SB17.2253	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PATTON BOGGS LLP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013	
Mailing Address 2550 M ST NW			Amount of Each Disbursement this Period 1250.00	
City WASHINGTON	State DC	Zip Code 20037	Transaction ID : SB17.2254	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. THE CLUB AT FAIRVUE PLANTATION</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013	
Mailing Address PO BOX 282408			Amount of Each Disbursement this Period 7118.83	
City NASHVILLE	State TN	Zip Code 37228	Transaction ID : SB17.2244	
Purpose of Disbursement FACILITY RENTAL/CATERING/DONOR MEMENTOS		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10902.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE COOKE HOUSE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address 319 E SPRING ST		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : SB17.2230</b>
City COOKEVILLE	State TN	
Zip Code 38501	Purpose of Disbursement CATERING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2013
Mailing Address PO BOX 553		Amount of Each Disbursement this Period 286.24 <b>Transaction ID : SB17.2255</b>
City WARRENDALE	State PA	
Zip Code 15086	Purpose of Disbursement PHONE SERVICE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2013
Mailing Address PO BOX 553		Amount of Each Disbursement this Period 286.20 <b>Transaction ID : SB17.2256</b>
City WARRENDALE	State PA	
Zip Code 15086	Purpose of Disbursement PHONE SERVICE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1772.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2013
Mailing Address PO BOX 553		Amount of Each Disbursement this Period 286.30 <b>Transaction ID : SB17.2257</b>
City WARRENDALE State PA Zip Code 15086	Purpose of Disbursement PHONE SERVICE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. W CURTIS DRAPER TOBACCO</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2013
Mailing Address 699 15TH ST NW		Amount of Each Disbursement this Period 860.30 <b>Transaction ID : SB17.2239</b>
City WASHINGTON State DC Zip Code 20229	Purpose of Disbursement FACILITY RENTAL/CATERING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WILLOWBROOK GOLF CLUB LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2013
Mailing Address 6751 MCMINNVILLE HWY		Amount of Each Disbursement this Period 367.00 <b>Transaction ID : SB17.2231</b>
City MANCHESTER State TN Zip Code 37355	Purpose of Disbursement CATERING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1513.60
<b>TOTAL</b> This Period (last page this line number only).....	66407.91

**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 61 OF 61	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Diane Black for Congress**

Full Name (Last, First, Middle Initial) <b>A. TENNESSEE REPUBLICAN PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 17 / 2013</b>
Mailing Address <b>2424 21ST AVENUE STE 200</b>		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : SB21.3333</b>
City <b>NASHVILLE</b> State <b>TN</b> Zip Code <b>37212</b>	Purpose of Disbursement <b>CONTRIBUTION</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>5000.00</b>