

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00300681
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
TN 03

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

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

5. Covering Period 07 01 2007 through 09 30 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer L. Dan Johnson, II

Signature of Treasurer Electronically Filed by L. Dan Johnson, II Date 10 10 2007

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Zach Wamp

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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)).....	123534.32	424620.32
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	123534.32	423520.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	103595.97	370981.10
(b) Total Offsets to Operating Expenditures (from Line 14).....	10.19	2112.24
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	103585.78	368868.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	827276.68	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Friends of Zach Wamp

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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).....

76684.32

282450.32

(ii) Unitemized.....

5350.00

17195.00

(iii) TOTAL of contributions

82034.32

299645.32

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

41500.00

124975.00

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

123534.32

424620.32

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

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

10.19

2112.24

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

6971.79

27482.61

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

130516.30

454215.17

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	103595.97	370981.10
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1100.00
21. OTHER DISBURSEMENTS.....	0.00	4000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	103595.97	376081.10

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	800356.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	130516.30
25. SUBTOTAL (add Line 23 and Line 24).....	930872.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	103595.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	827276.68

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 84
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Amer. Forest & Paper Pac

Mailing Address 1111 19th St NW Ste 800
Suite 800

City State Zip Code
Washington DC 20036-3603

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: 71005.C20497

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Amer. Psychiatric Pac

Mailing Address 1000 Wilson Blvd Ste 1825
Suite 1825

City State Zip Code
Arlington VA 22209-3924

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 30 / 2007

Transaction ID: 71005.C20485

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1120 CONnecticut Ave.,NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 03 / 2007

Transaction ID: 71005.C20478

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 84
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
American Optometric Association

Mailing Address 1505 Prince Street, Suite 300

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2007

Transaction ID: 71005.C20400

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
Arcadis G&M, Inc.PAC

Mailing Address 630 Plaza Drive Suite 200

City State Zip Code
Highlands Ranch CO 80129

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: 71005.C20501

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
AT&T Wireless PAC

Mailing Address 1150 Connecticut Avenue, N.W.

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 03 / 2007

Transaction ID: 71005.C20477

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 84
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
AT&T Wireless PAC

Mailing Address 1150 Connecticut Avenue, N.W.

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 19 / 2007

Transaction ID: 71005.C20534

Amount of Each Receipt this Period
 2000.00

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

B. Full Name (Last, First, Middle Initial)
Babcock & Wilcox Co. Pac

Mailing Address 2016 Mount Athos Rd

City Lynchburg State VA Zip Code 24504-5447

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 30 / 2007

Transaction ID: 71005.C20486

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Babcock & Wilcox Co. Pac

Mailing Address 2016 Mount Athos Rd

City Lynchburg State VA Zip Code 24504-5447

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 03 / 2007

Transaction ID: 71005.C20476

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 84
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Babcock & Wilcox Co. Pac

Mailing Address 2016 Mount Athos Rd

City Lynchburg State VA Zip Code 24504-5447

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2007

Transaction ID: 71005.C20549

Amount of Each Receipt this Period
3000.00

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

B. Full Name (Last, First, Middle Initial)
BAE Systems Pac

Mailing Address 1300 17th St N

City Arlington State VA Zip Code 22209-3803

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: 71005.C20500

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005-2842

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 27 / 2007

Transaction ID: 71005.C20411

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

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

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

FOR LINE NUMBER: PAGE 9 / 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Comcast Corporation PAC
Mailing Address 1500 Market Street
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
2000.00

Date of Receipt
09 / 07 / 2007
Transaction ID: 71005.C20374
Amount of Each Receipt this Period
2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
CONPAC
Mailing Address 129 Park St NE Ste 8 Suite 8
City Vienna State VA Zip Code 22180-4602
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
1000.00

Date of Receipt
07 / 20 / 2007
Transaction ID: 71005.C20498
Amount of Each Receipt this Period
1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Energysolutions, LLC PAC
Mailing Address 423 W 300 South Suite 200
City Salt Lake City State UT Zip Code 84101-1102
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
3500.00

Date of Receipt
09 / 26 / 2007
Transaction ID: 71005.C20547
Amount of Each Receipt this Period
1500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 4500.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 84
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
ENGPAC

Mailing Address 520 S.Grand Avenue, Ste.700

City State Zip Code
Los Angeles CA 90071

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2007

Transaction ID: 71005.C20429

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Federation of American Hospitals PAC

Mailing Address 801 Pennsylvania Avenue Ste.245

City State Zip Code
Washington DC 20004-2604

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2007

Transaction ID: 71005.C20373

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
HCA Good Government Fund

Mailing Address One Park Plaza P.O.Box 550

City State Zip Code
Nashville TN 37202-0550

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 03 / 2007

Transaction ID: 71005.C20475

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 84
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
PAC-Realtors PAC

Mailing Address 430 N. Michigan Avenue

City Chicago State IL Zip Code 60611

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 3 1 / 2 0 0 7

Transaction ID: 71005.C20399

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
Roe Enterprises, Inc. PAC

Mailing Address 700 Kinderkamack Road

City Oradell State NJ Zip Code 07649

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 2 8 / 2 0 0 7

Transaction ID: 71005.C20558

Amount of Each Receipt this Period
 2000.00

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

C. Full Name (Last, First, Middle Initial)
Specialty Equipment Market Assoc. PAC

Mailing Address 1575 S.Valley Vista Drive

City Diamond Bar State CA Zip Code 91765-0910

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: 71005.C20420

Amount of Each Receipt this Period
 2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 84
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
T Mobile PAC

Mailing Address 401 9th Street, NW
Suite 550

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2007

Transaction ID: 71005.C20499

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
Washington Group International PAC

Mailing Address 2345 Crystal Drive, Ste.708

City State Zip Code
Arlington VA 22202

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2007

Transaction ID: 71005.C20548

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	7000.00
TOTAL This Period (last page this line number only)	▶	41500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 84 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
--	---

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

NAME OF COMMITTEE (In Full)
 Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial) Sonny Callahan & Associates Mailing Address PO Box 9699 City State Zip Code Mobile AL 36691-0699 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7 Transaction ID: 71005.C20518 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) J. Dean Baggett Mailing Address P.O.Box 1773 406 W. Madison Avenue City State Zip Code Athens TN 37371 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7 Transaction ID: 71005.C20401 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Self-employed Optometrist Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Randy C. Baker Mailing Address 1505 Dugdale St City State Zip Code Chattanooga TN 37405-4350 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 71005.C20437 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation RCB Management CEO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Ronald Barnes

Mailing Address 8212 Bell Mill Road

City Ooltewah State TN Zip Code 37363-8896

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

Name of Employer Primerica Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: 71005.C20395

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 3901 Sam Cooper Road

City Knoxville State TN Zip Code 37918

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

Name of Employer Holston Gases, Inc. Occupation Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: 71005.C20451

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Ginger Baxter

Mailing Address 3901 Sam Cooper Road

City Knoxville State TN Zip Code 37918

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

Name of Employer Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 0 7

Transaction ID: 71005.C20450

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ► **6900.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
John B. Bennett

Mailing Address 3110 Pintail Lane

City State Zip Code
Signal Mountain TN 37377

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

Name of Employer Occupation
Spears, Moore, Rebman, Williams Partner

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

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 23 / 2007

Transaction ID: 71005.C20436

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 9317 Mountain Shade Drive

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Occupation
Southeast Eye Specialists Ophthalmologist

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

52.27

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2007

Transaction ID: 71005.C20560

Amount of Each Receipt this Period
52.27

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

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

Mailing Address 9317 Mountain Shade Drive

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Occupation
Southeast Eye Specialists Ophthalmologist

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

1052.27

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2007

Transaction ID: 71005.C20403

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2052.27**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Abraham Boackle

Mailing Address 1475 Manassas Dr

City State Zip Code
Hixson TN 37343-3387

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2007

Transaction ID: 71005.C20421

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
W.W. Boyd

Mailing Address P.O.Box 1147

City State Zip Code
Tallahassee FL 32302-1147

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

Name of Employer Self-employed Occupation Mechanical Engineer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2007

Transaction ID: 71005.C20522

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Robin Brady

Mailing Address 720 Forest Ave.

City State Zip Code
Chattanooga TN 37405

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

Name of Employer Self Occupation Optometrist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2007

Transaction ID: 71005.C20402

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Paul K. Brock, Jr.

Mailing Address 126 West Watkins Street

City State Zip Code
Lookout Mountain TN 37350

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

Name of Employer Occupation
Childrens Discovery Museum Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 08 / 2007

Transaction ID: 71005.C20469

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Ollie Brotherton

Mailing Address 4425 Ranchwood Ln

City State Zip Code
Tampa FL 33624-1730

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

Name of Employer Occupation
Tampa Flooring Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2007

Transaction ID: 71005.C20506

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Katherine Ann Bunch

Mailing Address P.O.Box 700

City State Zip Code
Maynardville TN 37807

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

Name of Employer Occupation
Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2007

Transaction ID: 71005.C20398

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	3050.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Rocelia O. Card

Mailing Address 1515 Heritage Landing Dr.

City State Zip Code
Chattanooga TN 37405

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

Name of Employer Occupation
Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4200.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2007

Transaction ID: 71005.C20453

Amount of Each Receipt this Period
1150.00

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

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

Mailing Address PO Box 24

City State Zip Code
Hixson TN 37343

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

Name of Employer Occupation
Card-Monroe, Inc. Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2007

Transaction ID: 71005.C20539

Amount of Each Receipt this Period
300.00

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

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

Mailing Address PO Box 24

City State Zip Code
Hixson TN 37343

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

Name of Employer Occupation
Card-Monroe, Inc. Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2600.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2007

Transaction ID: 71005.C20538

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ► **3750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Jeff Carmichael

Mailing Address 3805 Monte Vista Drive

City State Zip Code
Chattanooga TN 37411

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

Name of Employer Discount Lighting Center Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2007

Transaction ID: 71005.C20381

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Bonnie Carroll

Mailing Address P.O. Box 4141

City State Zip Code
Oak Ridge TN 37831

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

Name of Employer Information Intl. Assoc., Inc. Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2007

Transaction ID: 71005.C20546

Amount of Each Receipt this Period
500.00

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

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

Mailing Address PO Box 349

City State Zip Code
Chattanooga TN 37401-0349

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

Name of Employer Carter Distributing Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2007

Transaction ID: 71005.C20438

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
JoAnn Cline-Yates

Mailing Address 119 Dogwood
P.O. Box 408

City Lookout Mountain State TN Zip Code 37350

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

Name of Employer Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2007

Transaction ID: 71005.C20457

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 2919 Braly Place

City Chattanooga State TN Zip Code 37415

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

Name of Employer Self-employed Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2007

Transaction ID: 71005.C20461

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Roy Coffee, III

Mailing Address 3209 Thornapple St.

City Chevy Chase State MD Zip Code 20815

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

Name of Employer Locke Liddle Strategies Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2007

Transaction ID: 71005.C20545

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
David Conner

Mailing Address 204 Sylvan Drive

City State Zip Code
Lookout Mountain TN 37350

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

Name of Employer Self Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 05 / 2007

Transaction ID: 71005.C20376

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 120 Center Park Lane

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Oak Ridge National Laboratory Occupation Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2007

Transaction ID: 71005.C20525

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Brenda Eyssen

Mailing Address 1108 Centennial Drive

City State Zip Code
Chattanooga TN 37405

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

Name of Employer Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 23 / 2007

Transaction ID: 71005.C20424

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Max Fuller

Mailing Address 8569 Balata Dr.

City Ooltewah State TN Zip Code 37363

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

Name of Employer U.S. Express Occupation Co-Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2007

Transaction ID: 71005.C20529

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Paul D. Grimm

Mailing Address 8025 Merry Oaks Ct

City Vienna State VA Zip Code 22182-4029

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

Name of Employer BG4, Inc. Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2007

Transaction ID: 71005.C20543

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Brett Hale

Mailing Address 9223 Tower Pines Cove

City Ooltewah State TN Zip Code 37363

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

Name of Employer Purdue Pharmaceutical Co. Occupation Pharmaceutical Sales

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2007

Transaction ID: 71005.C20423

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4550.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
James C. Hall

Mailing Address 1104 Shadyland Drive

City State Zip Code
Knoxville TN 37919

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

Name of Employer Occupation
Washington Group International Regional Vice President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2007

Transaction ID: 71005.C20528

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Becky Hash

Mailing Address 815 Ivy Lake Drive

City State Zip Code
Forest VA 24551

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

Name of Employer Occupation
Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: 71005.C20448

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Ken Higgins

Mailing Address 650 25th St NW Ste 100 Suite 100

City State Zip Code
Cleveland TN 37311-1353

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

Name of Employer Occupation
Santek, Inc. President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: 71005.C20526

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	4850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Glenn Hobbs

Mailing Address 1314 Riverview Road

City State Zip Code
Chattanooga TN 37406

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

Name of Employer
Communications & Electronics.

Occupation
President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: 71005.C20550

Amount of Each Receipt this Period
1500.00

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

B. Full Name (Last, First, Middle Initial)
David Hudson

Mailing Address 1615 Cowart St.
#103

City State Zip Code
Chattanooga TN 37408

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

Name of Employer
Artech Design group

Occupation
Architect

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2007

Transaction ID: 71005.C20439

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 10142 Highgate Circle

City State Zip Code
Oak Ridge TN 37831-4499

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

Name of Employer
BWXT-Y-12

Occupation
Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: 71005.C20449

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Charlie Hunt

Mailing Address 8606 Brow Lake Road

City State Zip Code
Soddy Daisy TN 37379

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

Name of Employer Occupation
Scenic Outdoor Signs Partner

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

1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2007

Transaction ID: 71005.C20435

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Christopher Jehn

Mailing Address 6508 Lakeview Drive

City State Zip Code
Falls Church VA 22041

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

Name of Employer Occupation
Cray, Inc. Executive

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

500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2007

Transaction ID: 71005.C20496

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Dan Johnson

Mailing Address 113 Valleybrook Drive

City State Zip Code
Hixson TN 37343

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

Name of Employer Occupation
City of Chattanooga Chief of Staff

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

2300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: 71005.C20556

Amount of Each Receipt this Period
1300.00

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

SUBTOTAL of Receipts This Page (optional) ► **2800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Dan Johnson

Mailing Address 113 Valleybrook Drive

City State Zip Code
Hixson TN 37343

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

Name of Employer City of Chattanooga Occupation Chief of Staff

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: 71005.C20557

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 3515 Edgewood Cirlice

City State Zip Code
Cleveland TN 37312

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

Name of Employer Hardees Franchises Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2007

Transaction ID: 71005.C20473

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Leslie Johnson

Mailing Address 9235 Mountain Shade Dr

City State Zip Code
Chattanooga TN 37421-7431

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

Name of Employer Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2007

Transaction ID: 71005.C20464

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Rita Kerr

Mailing Address 100 Scenic Hwy., #32

City State Zip Code
Lookout Mountain TN 37350

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

Name of Employer Occupation
Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2007

Transaction ID: 71005.C20484

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Rita Kerr

Mailing Address 100 Scenic Hwy., #32

City State Zip Code
Lookout Mountain TN 37350

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

Name of Employer Occupation
Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2007

Transaction ID: 71005.C20552

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Roger Layne

Mailing Address 5012 Old Chestnut Ridge Rd.

City State Zip Code
Signal Mountain TN 37377

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

Name of Employer Occupation
Tenn Rand General Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: 71005.C20520

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Roger Layne

Mailing Address 5012 Old Chestnut Ridge Rd.

City State Zip Code
Signal Mountain TN 37377

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

Name of Employer Occupation
Tenn Rand General Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: 71005.C20554

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 801 Chestnut Street

City State Zip Code
Chattanooga TN 37402

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

Name of Employer Occupation
Self-employed Optometrist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2007

Transaction ID: 71005.C20409

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 125 Newell Lane

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
Self-employed Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 09 / 2007

Transaction ID: 71005.C20527

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Mark J. Magliocchetti

Mailing Address 10203 Woodvale Pond Dr

City State Zip Code
Fairfax Station VA 22039-1658

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

Name of Employer Occupation
PMA Group Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2007

Transaction ID: 71005.C20544

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Daryl Mann

Mailing Address 7813 Magnolia Lake Drive

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Occupation
Self-employed Optometrist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2007

Transaction ID: 71005.C20404

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Daryl Mann

Mailing Address 7813 Magnolia Lake Drive

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Occupation
Self-employed Optometrist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1052.28

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2007

Transaction ID: 71005.C20559

Amount of Each Receipt this Period
52.28

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

SUBTOTAL of Receipts This Page (optional)	▶	2052.28
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Scottie Mayfield, Jr.

Mailing Address 151 Highway 307, P.O. Box 788

City Athens State TN Zip Code 37371-0788

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

Name of Employer Mayfield Dairy Farms, Inc. Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2007

Transaction ID: 71005.C20444

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 130 Rymer Road NW

City Cleveland State TN Zip Code 37312

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

Name of Employer Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2007

Transaction ID: 71005.C20455

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Betty McKee

Mailing Address 9530 Glynn Downing Drive

City Ooltewah State TN Zip Code 37363

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

Name of Employer Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2007

Transaction ID: 71005.C20551

Amount of Each Receipt this Period
1500.00

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

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Richard A. Molen

Mailing Address 5130 Observation Way

City State Zip Code
Alexandria VA 22312-1925

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

Name of Employer Occupation
Lent, Scrivner, & Roth Associate

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

1000.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2007

Transaction ID: 71005.C20482

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Rae Moon

Mailing Address 5121 Old Chestnut Ridge Rd

City State Zip Code
Signal Mountain TN 37377-1006

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

Name of Employer Occupation
Homemaker

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

250.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2007

Transaction ID: 71005.C20488

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Delbert Morgan

Mailing Address 331 Byerley Bend Road

City State Zip Code
Blaine TN 37709

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

Name of Employer Occupation
American Kennel Club President

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

2000.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2007

Transaction ID: 71005.C20397

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Edward Peterson

Mailing Address 2188 Sargent Daly Dr.

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Self Occupation Optometrist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2007

Transaction ID: 71005.C20405

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Stephen Phipps

Mailing Address 4289 Weaver Ft. Jefferson

City State Zip Code
Greenville OH 45331

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

Name of Employer Woolpert Corp. Occupation Associate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2007

Transaction ID: 71005.C20540

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 6845 Silver Cloud Cv

City State Zip Code
Ooltewah TN 37363-7170

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

Name of Employer Dixie Produce Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2007

Transaction ID: 71005.C20535

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	▶	5300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

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

Mailing Address 6845 Silver Cloud Cv

City Ooltewah State TN Zip Code 37363-7170

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

Name of Employer Dixie Produce Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 26 / 2007

Transaction ID: 71005.C20536

Amount of Each Receipt this Period
 200.00

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

B. Full Name (Last, First, Middle Initial)
Patrick Quinn

Mailing Address 4080 Jenkins Road

City Chattanooga State TN Zip Code 37421

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

Name of Employer U.S. Xpress Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 05 / 2007

Transaction ID: 71005.C20375

Amount of Each Receipt this Period
 2300.00

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

C. Full Name (Last, First, Middle Initial)
Jim Richards

Mailing Address 6438 Noble Dr

City Mc Lean State VA Zip Code 22101-5263

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

Name of Employer Cornerstone Occupation Government Relations

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 20 / 2007

Transaction ID: 71005.C20493

Amount of Each Receipt this Period
 1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
James Robinson

Mailing Address 1727 Auburndale Ave.

City State Zip Code
Chattanooga TN 37405

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

Name of Employer Occupation
Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2007

Transaction ID: 71005.C20470

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Blair Ross, Jr.

Mailing Address 109 Wesley Lane

City State Zip Code
Oak Ridge TN 37830

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

Name of Employer Occupation
Ut -Battelle Developer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2007

Transaction ID: 71005.C20442

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Jeff Sikes

Mailing Address PO Box 18944

City State Zip Code
Huntsville AL 35804-8944

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

Name of Employer Occupation
Jeff Sikes Mazda Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2007

Transaction ID: 71005.C20410

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

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

Mailing Address 1838 Clear Brook Ct

City State Zip Code
Chattanooga TN 37421-2783

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

Name of Employer Occupation
Thompson Engineering Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
854.77

Date of Receipt
MM / DD / YYYY
08 / 22 / 2007

Transaction ID: 71005.C20502

Amount of Each Receipt this Period
854.77

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

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

Mailing Address 1838 Clear Brook Ct

City State Zip Code
Chattanooga TN 37421-2783

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

Name of Employer Occupation
Thompson Engineering Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1854.77

Date of Receipt
MM / DD / YYYY
08 / 23 / 2007

Transaction ID: 71005.C20433

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1160 Tennis Road

City State Zip Code
Charlottesville VA 22901

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

Name of Employer Occupation
Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2007

Transaction ID: 71005.C20416

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2354.77**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

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

Mailing Address 1516 Lyndhurst Drive

City State Zip Code
Chattanooga TN 37405

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

Name of Employer Occupation
Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2007

Transaction ID: 71005.C20474

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 1267 Duane Road

City State Zip Code
Chattanooga TN 37405

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

Name of Employer Occupation
Self-employed Optometrist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2007

Transaction ID: 71005.C20406

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Claude Swafford

Mailing Address P.O. Box 519

City State Zip Code
Jasper TN 37347

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

Name of Employer Occupation
Swafford & Swafford Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2007

Transaction ID: 71005.C20564

Amount of Each Receipt this Period
125.00

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

SUBTOTAL of Receipts This Page (optional) ► **1375.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Clay Swanzy

Mailing Address PO Box 9699

City State Zip Code
Mobile AL 36691-0699

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

Name of Employer Sonny Callahan & Associates
Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 27 / 2007

Transaction ID: 71005.C20519

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 598 Jenkins Rd NE

City State Zip Code
Cleveland TN 37312

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

Name of Employer Tarver Distributing
Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 23 / 2007

Transaction ID: 71005.C20430

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 2215 Harris Circle, NW

City State Zip Code
Cleveland TN 37311

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

Name of Employer Bank of Cleveland
Occupation Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 23 / 2007

Transaction ID: 71005.C20432

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

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

Mailing Address 2021 S Liberty Dr

City State Zip Code
Liberty Lake WA 99019-9782

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

Name of Employer Cray, Inc. Occupation President/CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2007

Transaction ID: 71005.C20495

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Donald W. VanArsdale

Mailing Address 510 Council Fire Dr.

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Hamilton Place Vision Clinic Occupation Optometrist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2007

Transaction ID: 71005.C20408

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Albert Waterhouse

Mailing Address 436 Market Street

City State Zip Code
Chattanooga TN 37405

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

Name of Employer Johnson Waterhouse Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2007

Transaction ID: 71005.C20434

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

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

Mailing Address 6111 Shallowford Rd.
Ste. 105

City State Zip Code
Chattanooga TN 37421

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

Name of Employer Occupation
Prudential RCR Realtor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2007

Transaction ID: 71005.C20407

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 3200 Valley Oaks Drive

City State Zip Code
Signal Mountain TN 37377

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

Name of Employer Occupation
Big Ridge Cleaners Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2007

Transaction ID: 71005.C20415

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Llew Wood

Mailing Address 13113 Pelfrey Lane

City State Zip Code
Fairfax VA 22033

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

Name of Employer Occupation
Applied Hydro-Acoustics Resear Engineering Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 26 / 2007

Transaction ID: 71005.C20542

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Turner Wood

Mailing Address 4101 Night Owl Ct.

City State Zip Code
Chattanooga TN 37419

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

Name of Employer Occupation
Broadway Electric Service Owner

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

250.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2007

Transaction ID: 71005.C20490

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Robert W. Wright

Mailing Address P.O.Box 437

City State Zip Code
Charleston TN 37310

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

Name of Employer Occupation
Wright Bros. Construction Co. Vice President

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

0.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2007

Transaction ID: 71005.C20508

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 3933 Clairmont Drive NE

City State Zip Code
Cleveland TN 37311

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

Name of Employer Occupation
Wright Brothers Construction Vice President

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

0.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2007

Transaction ID: 71005.C20510

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Wright Bros. Construction Co.

Mailing Address P.O.Box 437

City Charleston State TN Zip Code 37310

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	3	/	2	0	0	7

Transaction ID: 71005.C20507

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Wright Bros. Construction Co.

Mailing Address P.O.Box 437

City Charleston State TN Zip Code 37310

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

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

Transaction ID: 71005.C20509

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Zevart Yacoubian

Mailing Address 1212 King Arthur Road

City Chattanooga State TN Zip Code 37421

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

Name of Employer Occupation
Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: 71005.C20426

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	76684.32

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 84
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. FSG Bank		Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2007
Mailing Address P.O.Box 11247		Transaction ID: 71005.C20511
City State Zip Code Chattanooga TN 37401-	Amount of Each Receipt this Period 285.21	
FEC ID number of contributing federal political committee. C	Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	
Election Cycle-to-Date 4268.05		

Full Name (Last, First, Middle Initial) B. FSG Bank		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2007
Mailing Address P.O.Box 11247		Transaction ID: 71005.C20516
City State Zip Code Chattanooga TN 37401-	Amount of Each Receipt this Period 227.56	
FEC ID number of contributing federal political committee. C	Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	
Election Cycle-to-Date 4495.61		

Full Name (Last, First, Middle Initial) C. FSG Bank		Date of Receipt M M / D D / Y Y Y Y Y 08 / 03 / 2007
Mailing Address P.O.Box 11247		Transaction ID: 71005.C20512
City State Zip Code Chattanooga TN 37401-	Amount of Each Receipt this Period 294.71	
FEC ID number of contributing federal political committee. C	Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	
Election Cycle-to-Date 4790.32		

SUBTOTAL of Receipts This Page (optional)	807.48
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 84
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. FSG Bank		Date of Receipt M M / D D / Y Y Y Y Y 08 / 31 / 2007	
Mailing Address P.O.Box 11247		Transaction ID: 71005.C20517	
City Chattanooga	State TN	Zip Code 37401-	Amount of Each Receipt this Period 228.05
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Election Cycle-to-Date ▼ 5018.37		

Full Name (Last, First, Middle Initial) B. FSG Bank		Date of Receipt M M / D D / Y Y Y Y Y 09 / 07 / 2007	
Mailing Address P.O.Box 11247		Transaction ID: 71005.C20513	
City Chattanooga	State TN	Zip Code 37401-	Amount of Each Receipt this Period 294.71
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Election Cycle-to-Date ▼ 5313.08		

Full Name (Last, First, Middle Initial) C. FSG Bank		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2007	
Mailing Address P.O.Box 11247		Transaction ID: 71005.C20562	
City Chattanooga	State TN	Zip Code 37401-	Amount of Each Receipt this Period 221.16
FEC ID number of contributing federal political committee. C		Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Election Cycle-to-Date ▼ 5534.24		

SUBTOTAL of Receipts This Page (optional) ▶	743.92
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 84
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. First Tennessee Bank		Date of Receipt M M / D D / Y Y Y Y Y 07 / 29 / 2007
Mailing Address 701 Market Street		Transaction ID: 71005.C20514
City State Zip Code Chattanooga TN 37402-	Amount of Each Receipt this Period 1553.33	
FEC ID number of contributing federal political committee. C	Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 18081.31	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		

Full Name (Last, First, Middle Initial) B. First Tennessee Bank		Date of Receipt M M / D D / Y Y Y Y Y 08 / 29 / 2007
Mailing Address 701 Market Street		Transaction ID: 71005.C20515
City State Zip Code Chattanooga TN 37402-	Amount of Each Receipt this Period 1630.30	
FEC ID number of contributing federal political committee. C	Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 19711.61	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		

Full Name (Last, First, Middle Initial) C. First Tennessee Bank		Date of Receipt M M / D D / Y Y Y Y Y 09 / 29 / 2007
Mailing Address 701 Market Street		Transaction ID: 71005.C20561
City State Zip Code Chattanooga TN 37402-	Amount of Each Receipt this Period 2236.76	
FEC ID number of contributing federal political committee. C	Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 21948.37	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		

SUBTOTAL of Receipts This Page (optional) ▶	5420.39
TOTAL This Period (last page this line number only) ▶	6971.79

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Alliance Promotions		Transaction ID: 71005.E4492 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 7
Mailing Address 6129 Airways Blvd.		Amount of Each Disbursement this Period 105.00
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE	Candidate Name	POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Aristotle		Transaction ID: 71005.E4581 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 7
Mailing Address 205 Pennsylvania Ave., SE		Amount of Each Disbursement this Period 85.00
City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement	Candidate Name	CONTRIBUTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Committee to Bailey		Transaction ID: 71005.E4543 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 7
Mailing Address 424 W Hillvale Turn		Amount of Each Disbursement this Period 250.00
City Knoxville State TN Zip Code 37919-6623	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CONTRIBUTION	Candidate Name	CONTRIBUTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	440.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. BankCard Center		Transaction ID: 71005.E4552 Date of Disbursement 07 / 02 / 2007
Mailing Address P.O. Box 1545		Amount of Each Disbursement this Period 787.21
City Memphis State TN Zip Code 38101-1545	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW-TRAVEL & FR COSTS		SEE BELOW-TRAVEL & FR COSTS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Tortilla Coast		Transaction ID: 71005.E4554 Date of Disbursement 07 / 02 / 2007
Mailing Address 400 1st St SE		Amount of Each Disbursement this Period 267.33
City Washington State DC Zip Code 20003-1826	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CAMPAIGN MEETING		[MEMO ITEM] MEMO: CAMPAIGN MEETING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Members Dining Room		Transaction ID: 71005.E4560 Date of Disbursement 07 / 02 / 2007
Mailing Address House of Representatives		Amount of Each Disbursement this Period 33.35
City Washington State DC Zip Code 20515-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEMBERSHIP MEETING		[MEMO ITEM] MEMO: MEMBERSHIP MEETING
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	787.21
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Federal Express Full Name (Last, First, Middle Initial) Mailing Address 3966 Airways Blvd City Memphis State TN Zip Code 38116- Purpose of Disbursement SHIPPING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 71005.E4553 Date of Disbursement 07 / 02 / 2007 Amount of Each Disbursement this Period 205.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: SHIPPING
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B. BankCard Center Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 1545 City Memphis State TN Zip Code 38101-1545 Purpose of Disbursement SEE BELOW-TRAVEL & FR COSTS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 71005.E4557 Date of Disbursement 07 / 30 / 2007 Amount of Each Disbursement this Period 1566.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SEE BELOW-TRAVEL & FR COSTS
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C. Members Dining Room Full Name (Last, First, Middle Initial) Mailing Address House of Representatives City Washington State DC Zip Code 20515- Purpose of Disbursement MEMBERSHIP MEETING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 71005.E4561 Date of Disbursement 07 / 30 / 2007 Amount of Each Disbursement this Period 45.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: MEMBERSHIP MEETING
--	--	--

SUBTOTAL of Disbursements This Page (optional) ▶	1566.19
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: 71005.E4558 Date of Disbursement 07 / 30 / 2007	
Mailing Address 3966 Airways Blvd		Amount of Each Disbursement this Period 80.12	
City Memphis State TN Zip Code 38116-	Purpose of Disbursement SHIPPING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: SHIPPING	

Full Name (Last, First, Middle Initial) B. U S Airways		Transaction ID: 71005.E4559 Date of Disbursement 07 / 30 / 2007	
Mailing Address P.O. Box 65		Amount of Each Disbursement this Period 922.50	
City Winston Salem State NC Zip Code 27102-0065	Purpose of Disbursement AIR FARE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: AIR FARE	

Full Name (Last, First, Middle Initial) C. BankCard Center		Transaction ID: 71005.E4569 Date of Disbursement 08 / 27 / 2007	
Mailing Address P.O. Box 1545		Amount of Each Disbursement this Period 6414.93	
City Memphis State TN Zip Code 38101-1545	Purpose of Disbursement SEE BELOW-TRAVEL & FR COSTS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW-TRAVEL & FR COS- TS	

SUBTOTAL of Disbursements This Page (optional) ▶	6414.93
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: 71005.E4571 Date of Disbursement 08 / 27 / 2007	
Mailing Address 3966 Airways Blvd		Amount of Each Disbursement this Period 102.49	
City Memphis State TN Zip Code 38116-	Purpose of Disbursement SHIPPING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: SHIPPING	

Full Name (Last, First, Middle Initial) B. Office Depot		Transaction ID: 71005.E4572 Date of Disbursement 08 / 27 / 2007	
Mailing Address 5756 Brainerd Road		Amount of Each Disbursement this Period 128.70	
City Chattanooga State TN Zip Code 37411-	Purpose of Disbursement OFFICE DEPOT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: OFFICE DEPOT	

Full Name (Last, First, Middle Initial) C. Avis Rent-A-Car		Transaction ID: 71005.E4575 Date of Disbursement 08 / 27 / 2007	
Mailing Address Jackson Airport		Amount of Each Disbursement this Period 333.66	
City Jackson State WY Zip Code 83001-	Purpose of Disbursement CAMPAIGN TRAVEL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CAMPAIGN TRAVEL	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. US House of Rep Gift		Transaction ID: 71005.E4574 Date of Disbursement																					
Mailing Address B-217 Longworth Building		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>7</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	7		2	0	7	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	7		2	0	7	7														
City Washington	State DC	Zip Code 20515-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FR GIFTS		Category/ Type	557.18																				
Candidate Name			<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
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) ▼		[MEMO ITEM] MEMO: FR GIFTS																				
State: District:																							

Full Name (Last, First, Middle Initial) B. Wal Mart		Transaction ID: 71005.E4573 Date of Disbursement																					
Mailing Address Hamilton Place Village		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>7</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	7		2	0	7	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	7		2	0	7	7														
City Chattanooga	State TN	Zip Code 37421-	Amount of Each Disbursement this Period																				
Purpose of Disbursement LABOR DAY SUPPLIES		Category/ Type	107.36																				
Candidate Name			<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
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) ▼		[MEMO ITEM] MEMO: LABOR DAY SUPPLIES																				
State: District:																							

Full Name (Last, First, Middle Initial) C. BankCard Center		Transaction ID: 71005.E4578 Date of Disbursement																					
Mailing Address P.O. Box 1545		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>7</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	7	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	8		2	0	7	7														
City Memphis	State TN	Zip Code 38101-1545	Amount of Each Disbursement this Period																				
Purpose of Disbursement SEE BELOW-TRAVEL & FR COSTS		Category/ Type	1432.36																				
Candidate Name			<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
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) ▼		SEE BELOW-TRAVEL & FR COS- TS																				
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	1432.36
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: 71005.E4579 Date of Disbursement 09 / 28 / 2007
Mailing Address 3966 Airways Blvd		Amount of Each Disbursement this Period 69.29
City Memphis State TN Zip Code 38116-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SHIPPING Candidate Name	Category/Type	[MEMO ITEM] MEMO: SHIPPING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. U S Airways		Transaction ID: 71005.E4580 Date of Disbursement 09 / 28 / 2007
Mailing Address P.O. Box 65		Amount of Each Disbursement this Period 348.80
City Winston Salem State NC Zip Code 27102-0065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement AIR FARE Candidate Name	Category/Type	[MEMO ITEM] MEMO: AIR FARE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. John R. Bierly		Transaction ID: 71005.C20560IK Date of Disbursement 08 / 31 / 2007
Mailing Address 9317 Mountain Shade Drive		Amount of Each Disbursement this Period 52.27
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Candidate Name	Category/Type	IN KIND:
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	52.27
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Elizabeth A. Brewster		Transaction ID: 71005.E4450 Date of Disbursement 07 / 02 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 4821.00	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) B. Elizabeth A. Brewster		Transaction ID: 71005.E4451 Date of Disbursement 07 / 03 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 262.08	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TRAVEL	

Full Name (Last, First, Middle Initial) C. Elizabeth A. Brewster		Transaction ID: 71005.E4452 Date of Disbursement 07 / 13 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 1150.00	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	6233.08
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Elizabeth A. Brewster		Transaction ID: 71005.E4453 Date of Disbursement MM / DD / YYYY 07 / 31 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 1140.63	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	SALARY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth A. Brewster		Transaction ID: 71005.E4454 Date of Disbursement MM / DD / YYYY 08 / 01 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 93.60	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	TRAVEL	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Elizabeth A. Brewster		Transaction ID: 71005.E4521 Date of Disbursement MM / DD / YYYY 08 / 15 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 1150.00	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	SALARY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2384.23
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Elizabeth A. Brewster		Transaction ID: 71005.E4455 Date of Disbursement 08 / 27 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 163.82	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement REIMBURSEMENTS Candidate Name	Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 REIMBURSEMENTS	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth A. Brewster		Transaction ID: 71005.E4456 Date of Disbursement 08 / 31 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 1140.62	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement SALARY Candidate Name	Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Elizabeth A. Brewster		Transaction ID: 71005.E4457 Date of Disbursement 09 / 07 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 187.21	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement TRAVEL Candidate Name	Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TRAVEL	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1491.65
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Elizabeth A. Brewster		Transaction ID: 71005.E4458 Date of Disbursement 09 / 14 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 1150.00	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	SALARY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Elizabeth A. Brewster		Transaction ID: 71005.E4538 Date of Disbursement 09 / 28 / 2007	
Mailing Address 1534 Ribbonwood Dr		Amount of Each Disbursement this Period 1140.62	
City Lakesite State TN Zip Code 37379-8950	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	SALARY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. For Senate Brock		Transaction ID: 71005.E4546 Date of Disbursement 09 / 04 / 2007	
Mailing Address 1400 McCallie Ave Ste 100		Amount of Each Disbursement this Period 1000.00	
City Chattanooga State TN Zip Code 37404-2927	Purpose of Disbursement CONTRIBUTION	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type	CONTRIBUTION	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3290.62
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Transaction ID: 71005.E4497 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 7
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 173.33 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003-	Purpose of Disbursement CAMPAIGN MEETINGS Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CAMPAIGN MEETINGS

Full Name (Last, First, Middle Initial) B. Alhambra Shrine Circus		Transaction ID: 71005.E4514 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 7
Mailing Address PO Box 21822		Amount of Each Disbursement this Period 125.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chattanooga State TN Zip Code 37424-0822	Purpose of Disbursement CONTRIBUTIONS Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CONTRIBUTIONS

Full Name (Last, First, Middle Initial) C. COMCAST		Transaction ID: 71005.E4493 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 7
Mailing Address P.O. Box 182249		Amount of Each Disbursement this Period 110.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chattanooga State TN Zip Code 37422-	Purpose of Disbursement INTERNET SERVICES Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	INTERNET SERVICES

SUBTOTAL of Disbursements This Page (optional) ▶	408.93
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. COMCAST		Transaction ID: 71005.E4494 Date of Disbursement 08 / 06 / 2007	
Mailing Address P.O. Box 182249		Amount of Each Disbursement this Period 110.60	
City Chattanooga	State TN	Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement INTERNET SERVICES	Category/ Type		
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	INTERNET SERVICES		
State: District:			

Full Name (Last, First, Middle Initial) B. COMCAST		Transaction ID: 71005.E4495 Date of Disbursement 09 / 07 / 2007	
Mailing Address P.O. Box 182249		Amount of Each Disbursement this Period 110.60	
City Chattanooga	State TN	Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement INTERNET SERVICES	Category/ Type		
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	INTERNET SERVICES		
State: District:			

Full Name (Last, First, Middle Initial) C. Ensign, Inc.		Transaction ID: 71005.E4498 Date of Disbursement 07 / 09 / 2007	
Mailing Address 1300 South Crest Road		Amount of Each Disbursement this Period 252.36	
City Rossville	State GA	Zip Code 30741-1599	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement FLOWERS	Category/ Type		
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	FLOWERS		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	473.56
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Ensign, Inc.		Transaction ID: 71005.E4499 Date of Disbursement 08 / 06 / 2007
Mailing Address 1300 South Crest Road		Amount of Each Disbursement this Period 124.54
City Rossville State GA Zip Code 30741-1599	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FLOWERS Candidate Name	Category/Type	FLOWERS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ensign, Inc.		Transaction ID: 71005.E4500 Date of Disbursement 09 / 06 / 2007
Mailing Address 1300 South Crest Road		Amount of Each Disbursement this Period 141.24
City Rossville State GA Zip Code 30741-1599	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FLOWERS Candidate Name	Category/Type	FLOWERS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. EPB Telecommunications		Transaction ID: 71005.E4501 Date of Disbursement 07 / 09 / 2007
Mailing Address P.O. Box 182250		Amount of Each Disbursement this Period 341.24
City Chattanooga State TN Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE Candidate Name	Category/Type	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	607.02
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. EPB Telecommunications		Transaction ID: 71005.E4502 Date of Disbursement 08 / 06 / 2007	
Mailing Address P.O. Box 182250		Amount of Each Disbursement this Period 329.50	
City Chattanooga	State TN	Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement TELEPHONE		Category/ Type	
Candidate Name		<input type="checkbox"/> TELEPHONE	
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. EPB Telecommunications		Transaction ID: 71005.E4503 Date of Disbursement 09 / 06 / 2007	
Mailing Address P.O. Box 182250		Amount of Each Disbursement this Period 326.22	
City Chattanooga	State TN	Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement TELEPHONE		Category/ Type	
Candidate Name		<input type="checkbox"/> TELEPHONE	
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) C. Sticky Fingers		Transaction ID: 71005.E4545 Date of Disbursement 09 / 04 / 2007	
Mailing Address 500 Broad St		Amount of Each Disbursement this Period 7598.34	
City Chattanooga	State TN	Zip Code 37402-1221	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement CAMPAIGN MEETING		Category/ Type	
Candidate Name		<input type="checkbox"/> CAMPAIGN MEETING	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional) ▶	8254.06
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. First Tennessee Bank		Transaction ID: 71005.E4490	
Mailing Address 701 Market Street		Date of Disbursement 07 / 03 / 2007	
City Chattanooga	State TN	Zip Code 37402-	Amount of Each Disbursement this Period 2215.04
Purpose of Disbursement PAYROLL TAXES		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		PAYROLL TAXES
State: District:			

Full Name (Last, First, Middle Initial) B. First Tennessee Bank		Transaction ID: 71005.E4512	
Mailing Address 701 Market Street		Date of Disbursement 07 / 27 / 2007	
City Chattanooga	State TN	Zip Code 37402-	Amount of Each Disbursement this Period 22.40
Purpose of Disbursement PAYROLL TAXES		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		PAYROLL TAXES
State: District:			

Full Name (Last, First, Middle Initial) C. First Tennessee Bank		Transaction ID: 71005.E4491	
Mailing Address 701 Market Street		Date of Disbursement 08 / 15 / 2007	
City Chattanooga	State TN	Zip Code 37402-	Amount of Each Disbursement this Period 7462.04
Purpose of Disbursement PAYROLL TAXES		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		PAYROLL TAXES
State: District:			

SUBTOTAL of Disbursements This Page (optional)	9699.48
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. First Tennessee Bank		Transaction ID: 71005.E4528	
Mailing Address 701 Market Street		Date of Disbursement 08 / 31 / 2007	
City Chattanooga	State TN	Zip Code 37402-	Amount of Each Disbursement this Period 2206.06
Purpose of Disbursement PAYROLL TAXES	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		PAYROLL TAXES
State: District:	Category/ Type		

Full Name (Last, First, Middle Initial) B. Sam Graves		Transaction ID: 71005.E4548	
Mailing Address 2345 Grand Blvd		Date of Disbursement 09 / 20 / 2007	
City Kansas City	State MO	Zip Code 64108-2663	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		CONTRIBUTION
State: District:	Category/ Type		

Full Name (Last, First, Middle Initial) C. Hamilton Place Insurance Agency, Inc.		Transaction ID: 71005.E4534	
Mailing Address 515 Airport Road		Date of Disbursement 09 / 12 / 2007	
City Chattanooga	State TN	Zip Code 37421-	Amount of Each Disbursement this Period 333.13
Purpose of Disbursement INSURANCE	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		INSURANCE
State: District:	Category/ Type		

SUBTOTAL of Disbursements This Page (optional)	3539.19
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Hays Framing Supplies, Inc.		Transaction ID: 71005.E4532 Date of Disbursement 09 / 12 / 2007
Mailing Address 1310 E. 14th Street		Amount of Each Disbursement this Period 225.21
City Chattanooga State TN Zip Code 37404-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FRAMING Candidate Name	Category/Type	FRAMING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hometown Threads		Transaction ID: 71005.E4524 Date of Disbursement 08 / 28 / 2007
Mailing Address 2020 Gunbarrel Road		Amount of Each Disbursement this Period 109.14
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FR GIFTS Candidate Name	Category/Type	FR GIFTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hometown Threads		Transaction ID: 71005.E4526 Date of Disbursement 09 / 07 / 2007
Mailing Address 2020 Gunbarrel Road		Amount of Each Disbursement this Period 1966.50
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FR GIFTS Candidate Name	Category/Type	FR GIFTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2300.85
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 63 / 84

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Hometown Threads		Transaction ID: 71005.E4525 Date of Disbursement 09 / 07 / 2007
Mailing Address 2020 Gunbarrel Road		Amount of Each Disbursement this Period 1540.43
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FR GIFTS	Candidate Name	FR GIFTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Duncan Hunter		Transaction ID: 71005.E4549 Date of Disbursement 09 / 28 / 2007
Mailing Address 9568 Leyendekker Ct		Amount of Each Disbursement this Period 500.00
City Lakeside State CA Zip Code 92040-4586	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CONTRIBUTION	Candidate Name	CONTRIBUTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Daryl Mann		Transaction ID: 71005.C205591K Date of Disbursement 08 / 31 / 2007
Mailing Address 7813 Magnolia Lake Drive		Amount of Each Disbursement this Period 52.28
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement	Candidate Name	IN KIND:
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2092.71
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Bill McCallie		Transaction ID: 71005.E4527 Date of Disbursement 08 / 31 / 2007
Mailing Address 3258 Cherokee Valley Road		Amount of Each Disbursement this Period 500.00
City Ringgold State GA Zip Code 30736-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement ENTERTAINMENT FOR FR	Candidate Name	ENTERTAINMENT FOR FR
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gerald McCormick Campaign		Transaction ID: 71005.E4520 Date of Disbursement 08 / 14 / 2007
Mailing Address 53311 Fairview Road		Amount of Each Disbursement this Period 500.00
City Hixson State TN Zip Code 37343-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement NON-FEDERAL CANDIDATE	Candidate Name	NON-FEDERAL CANDIDATE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kelley L. McNabb		Transaction ID: 71005.E4480 Date of Disbursement 07 / 03 / 2007
Mailing Address 5988 Chandler Hill Rd.		Amount of Each Disbursement this Period 323.04
City Ooltewah State TN Zip Code 37363-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRAVEL	Candidate Name	TRAVEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1323.04
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

<p>A. Full Name (Last, First, Middle Initial) Kelley L. McNabb</p>		<p>Transaction ID: 71005.E4481 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		3	1		2	0	0	7														
<p>Mailing Address 5988 Chandler Hill Rd.</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>516.10</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 </p>		516.10																			
516.10																							
<p>City Ooltewah State TN Zip Code 37363-</p>	<p>Purpose of Disbursement SALARY</p>	<p>Category/ Type</p>																					
<p>Candidate Name</p>	<p>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: </p>																						

<p>B. Full Name (Last, First, Middle Initial) Kelley L. McNabb</p>		<p>Transaction ID: 71005.E4482 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	1		2	0	0	7														
<p>Mailing Address 5988 Chandler Hill Rd.</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>33.12</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 </p>		33.12																			
33.12																							
<p>City Ooltewah State TN Zip Code 37363-</p>	<p>Purpose of Disbursement TRAVEL</p>	<p>Category/ Type</p>																					
<p>Candidate Name</p>	<p>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: </p>																						

<p>C. Full Name (Last, First, Middle Initial) Kelley L. McNabb</p>		<p>Transaction ID: 71005.E4483 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		3	1		2	0	0	7														
<p>Mailing Address 5988 Chandler Hill Rd.</p>		<p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>516.10</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 </p>		516.10																			
516.10																							
<p>City Ooltewah State TN Zip Code 37363-</p>	<p>Purpose of Disbursement SALARY</p>	<p>Category/ Type</p>																					
<p>Candidate Name</p>	<p>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: </p>																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>1065.32</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Kelley L. McNabb		Transaction ID: 71005.E4539 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 5988 Chandler Hill Rd.		Amount of Each Disbursement this Period 516.10
City Ooltewah State TN Zip Code 37363-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Nextel Communications		Transaction ID: 71005.E4508 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address 1505 Farm Credit Drive		Amount of Each Disbursement this Period 336.41
City Mc Lean State VA Zip Code 22102-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE Candidate Name	Category/Type	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nextel Communications		Transaction ID: 71005.E4509 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 7
Mailing Address 1505 Farm Credit Drive		Amount of Each Disbursement this Period 337.87
City Mc Lean State VA Zip Code 22102-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE Candidate Name	Category/Type	TELEPHONE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1190.38
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Nextel Communications		Transaction ID: 71005.E4510 Date of Disbursement 09 / 20 / 2007
Mailing Address 1505 Farm Credit Drive		Amount of Each Disbursement this Period 333.72
City Mc Lean State VA Zip Code 22102-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE	Category/ Type	TELEPHONE
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Lexus of Chattanooga		Transaction ID: 71005.E4470 Date of Disbursement 07 / 02 / 2007
Mailing Address 5800 Lee Highway		Amount of Each Disbursement this Period 500.00
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CANDIDATE TRAVEL	Category/ Type	CANDIDATE TRAVEL
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Lexus of Chattanooga		Transaction ID: 71005.E4471 Date of Disbursement 07 / 30 / 2007
Mailing Address 5800 Lee Highway		Amount of Each Disbursement this Period 500.00
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CANDIDATE TRAVEL	Category/ Type	CANDIDATE TRAVEL
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	1333.72
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Lexus of Chattanooga		Transaction ID: 71005.E4472 Date of Disbursement 08 / 21 / 2007
Mailing Address 5800 Lee Highway		Amount of Each Disbursement this Period 227.89
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CANDIDATE TRAVEL	
Purpose of Disbursement CANDIDATE TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Lexus of Chattanooga		Transaction ID: 71005.E4473 Date of Disbursement 08 / 27 / 2007
Mailing Address 5800 Lee Highway		Amount of Each Disbursement this Period 500.00
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CANDIDATE TRAVEL	
Purpose of Disbursement CANDIDATE TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Lexus of Chattanooga		Transaction ID: 71005.E4474 Date of Disbursement 09 / 24 / 2007
Mailing Address 5800 Lee Highway		Amount of Each Disbursement this Period 500.00
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CANDIDATE TRAVEL	
Purpose of Disbursement CANDIDATE TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1227.89
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: 71005.E4488 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
Mailing Address 5756 Brainerd Road		Amount of Each Disbursement this Period 60.18
City Chattanooga State TN Zip Code 37411-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Office Depot		Transaction ID: 71005.E4516 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 7
Mailing Address 5756 Brainerd Road		Amount of Each Disbursement this Period 83.63
City Chattanooga State TN Zip Code 37411-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: 71005.E4517 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7
Mailing Address 5756 Brainerd Road		Amount of Each Disbursement this Period 27.29
City Chattanooga State TN Zip Code 37411-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	171.10
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Petty Cash		Transaction ID: 71005.E4555 Date of Disbursement 07 / 09 / 2007	
Mailing Address P.O. Box 24804		Amount of Each Disbursement this Period 215.20	
City Chattanooga	State TN	Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement SEE BELOW-OFFICE SUPPLIES		Category/ Type	
Candidate Name		<input type="checkbox"/> 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:		SEE BELOW-OFFICE SUPPLIES	

Full Name (Last, First, Middle Initial) B. Hamilton Co. Pachyderm		Transaction ID: 71005.E4556 Date of Disbursement 07 / 09 / 2007	
Mailing Address P. O. Box 4451		Amount of Each Disbursement this Period 74.00	
City Chattanooga	State TN	Zip Code 37405-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement MEMBERSHIP MEETINGS		Category/ Type	
Candidate Name		<input type="checkbox"/> 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:		[MEMO ITEM] MEMO: MEMBERSHIP MEETINGS	

Full Name (Last, First, Middle Initial) C. Petty Cash		Transaction ID: 71005.E4562 Date of Disbursement 07 / 30 / 2007	
Mailing Address P.O. Box 24804		Amount of Each Disbursement this Period 283.69	
City Chattanooga	State TN	Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement SEE BELOW-OFFICE SUPPLIES		Category/ Type	
Candidate Name		<input type="checkbox"/> 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:		SEE BELOW-OFFICE SUPPLIES	

SUBTOTAL of Disbursements This Page (optional) ▶	498.89
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: 71005.E4565 Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2007
Mailing Address 5756 Brainerd Road		Amount of Each Disbursement this Period 53.50
City Chattanooga State TN Zip Code 37411-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES Candidate Name	Category/Type	[MEMO ITEM] MEMO: OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hamilton Co. Pachyderm		Transaction ID: 71005.E4563 Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2007
Mailing Address P. O. Box 4451		Amount of Each Disbursement this Period 34.00
City Chattanooga State TN Zip Code 37405-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEMBERSHIP MEETING Candidate Name	Category/Type	[MEMO ITEM] MEMO: MEMBERSHIP MEETING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: 71005.E4564 Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2007
Mailing Address 6050 Shallowford Road		Amount of Each Disbursement this Period 19.84
City Chattanooga State TN Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE Candidate Name	Category/Type	[MEMO ITEM] MEMO: POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Petty Cash		Transaction ID: 71005.E4566 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7
Mailing Address P.O. Box 24804		Amount of Each Disbursement this Period 224.28
City Chattanooga State TN Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW-OFFICE SUPPLIES		SEE BELOW-OFFICE SUPPLIES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hamilton Co. Pachyderm		Transaction ID: 71005.E4567 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7
Mailing Address P. O. Box 4451		Amount of Each Disbursement this Period 73.00
City Chattanooga State TN Zip Code 37405-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement MEMBERSHIP MEETINGS		[MEMO ITEM] MEMO: MEMBERSHIP MEETINGS
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Petty Cash		Transaction ID: 71005.E4576 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 7
Mailing Address P.O. Box 24804		Amount of Each Disbursement this Period 302.71
City Chattanooga State TN Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SEE BELOW-OFFICE SUPPLIES		SEE BELOW-OFFICE SUPPLIES
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	526.99
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

A. Full Name (Last, First, Middle Initial)
Hamilton Co. Pachyderm

Mailing Address P. O. Box 4451

City Chattanooga State TN Zip Code 37405-

Purpose of Disbursement MEMBERSHIP MEETINGS

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 71005.E4577
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

[MEMO ITEM]
MEMO: MEMBERSHIP MEETINGS

B. Full Name (Last, First, Middle Initial)
Bradley Rentals

Mailing Address 336 Grove Ave SW

City Cleveland State TN Zip Code 37311-5719

Purpose of Disbursement CAMPAIGN MEETINGS

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 71005.E4544
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

CAMPAIGN MEETINGS

C. Full Name (Last, First, Middle Initial)
Bradley County Republican Party

Mailing Address 174 Hunters Run Place

City Cleveland State TN Zip Code 37312-

Purpose of Disbursement LINCOLN DAY DINNER

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 71005.E4518
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

LINCOLN DAY DINNER

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. TN Republican Party		Transaction ID: 71005.E4522	
Mailing Address 2323 Hillsboro Road		Date of Disbursement 08 / 16 / 2007	
City Nashville	State TN	Zip Code 37212-	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement TRANSFER OF EXCESS CAMPAIGN FUNDS		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		TRANSFER OF EXCESS CAMPAIGN FUNDS
State: District:			

Full Name (Last, First, Middle Initial) B. Tennessee Right to Life		Transaction ID: 71005.E4536	
Mailing Address PO Box 110765		Date of Disbursement 09 / 24 / 2007	
City Nashville	State TN	Zip Code 37222-0765	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement SPONSORSHIP		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		SPONSORSHIP
State: District:			

Full Name (Last, First, Middle Initial) C. Sams Club		Transaction ID: 71005.E4505	
Mailing Address 6101 Lee Hwy		Date of Disbursement 07 / 13 / 2007	
City Chattanooga	State TN	Zip Code 37421-	Amount of Each Disbursement this Period 172.81
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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) ▼		OFFICE SUPPLIES
State: District:			

SUBTOTAL of Disbursements This Page (optional)	2172.81
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Sams Club		Transaction ID: 71005.E4506 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7
Mailing Address 6101 Lee Hwy		Amount of Each Disbursement this Period 70.00
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement OFFICE SUPPLIES Candidate Name	Category/Type	OFFICE SUPPLIES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Signal Mountain Golf & Country Club		Transaction ID: 71005.E4533 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 7
Mailing Address 809 James Blvd		Amount of Each Disbursement this Period 1691.19
City Signal Mountain State TN Zip Code 37377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUND RAISING COSTS Candidate Name	Category/Type	FUND RAISING COSTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jeffrey A. Sikes		Transaction ID: 71005.C20502IK Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 7
Mailing Address 1838 Clear Brook Ct		Amount of Each Disbursement this Period 854.77
City Chattanooga State TN Zip Code 37421-2783	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Candidate Name	Category/Type	IN KIND:
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2615.96
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. University of Tennessee		Transaction ID: 71005.E4530 Date of Disbursement 09 / 06 / 2007
Mailing Address Cumberland Ave.		Amount of Each Disbursement this Period 264.00
City Knoxville State TN Zip Code 37919-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUND RAISING COSTS	Candidate Name	FUND RAISING COSTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. University of Tennessee		Transaction ID: 71005.E4531 Date of Disbursement 09 / 06 / 2007
Mailing Address Cumberland Ave.		Amount of Each Disbursement this Period 160.00
City Knoxville State TN Zip Code 37919-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUND RAISING COSTS	Candidate Name	FUND RAISING COSTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Bolles Company		Transaction ID: 71005.E4535 Date of Disbursement 09 / 20 / 2007
Mailing Address P.O. Box 22425		Amount of Each Disbursement this Period 262.20
City Chattanooga State TN Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUND RAISING COSTS	Candidate Name	FUND RAISING COSTS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	686.20
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. The Williams Company		Transaction ID: 71005.E4475 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
Mailing Address 6130 Airways Blvd.		Amount of Each Disbursement this Period 1500.00
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENT Candidate Name	Category/Type	RENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. The Williams Company		Transaction ID: 71005.E4476 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 7
Mailing Address 6130 Airways Blvd.		Amount of Each Disbursement this Period 122.69
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRINTING Candidate Name	Category/Type	PRINTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Williams Company		Transaction ID: 71005.E4477 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 7
Mailing Address 6130 Airways Blvd.		Amount of Each Disbursement this Period 5240.99
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PRINTING Candidate Name	Category/Type	PRINTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6863.68
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. The Williams Company		Transaction ID: 71005.E4478 Date of Disbursement 08 / 16 / 2007	
Mailing Address 6130 Airways Blvd.		Amount of Each Disbursement this Period 1752.65	
City Chattanooga State TN Zip Code 37421-	Purpose of Disbursement PRINTING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PRINTING	

Full Name (Last, First, Middle Initial) B. The Williams Company		Transaction ID: 71005.E4479 Date of Disbursement 09 / 12 / 2007	
Mailing Address 6130 Airways Blvd.		Amount of Each Disbursement this Period 1756.45	
City Chattanooga State TN Zip Code 37421-	Purpose of Disbursement PRINTING	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PRINTING	

Full Name (Last, First, Middle Initial) C. Friends of Fred Thompson		Transaction ID: 71005.E4550 Date of Disbursement 08 / 01 / 2007	
Mailing Address PO Box 128349		Amount of Each Disbursement this Period 2000.00	
City Nashville State TN Zip Code 37212-8349	Purpose of Disbursement CONTRIBUTION	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CONTRIBUTION	

SUBTOTAL of Disbursements This Page (optional) ▶	5509.10
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Richard Tucker		Transaction ID: 71005.E4464 Date of Disbursement 07 / 02 / 2007	
Mailing Address P.O. Box 734		Amount of Each Disbursement this Period 4800.00	
City Hixson State TN Zip Code 37343-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type SALARY	

Full Name (Last, First, Middle Initial) B. Richard Tucker		Transaction ID: 71005.E4465 Date of Disbursement 07 / 03 / 2007	
Mailing Address P.O. Box 734		Amount of Each Disbursement this Period 162.96	
City Hixson State TN Zip Code 37343-	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type TRAVEL	

Full Name (Last, First, Middle Initial) C. Richard Tucker		Transaction ID: 71005.E4466 Date of Disbursement 07 / 31 / 2007	
Mailing Address P.O. Box 734		Amount of Each Disbursement this Period 2097.75	
City Hixson State TN Zip Code 37343-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	7060.71
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Richard Tucker		Transaction ID: 71005.E4467 Date of Disbursement 08 / 01 / 2007	
Mailing Address P.O. Box 734		Amount of Each Disbursement this Period 455.90	
City Hixson State TN Zip Code 37343-	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TRAVEL	

Full Name (Last, First, Middle Initial) B. Richard Tucker		Transaction ID: 71005.E4468 Date of Disbursement 08 / 31 / 2007	
Mailing Address P.O. Box 734		Amount of Each Disbursement this Period 2097.75	
City Hixson State TN Zip Code 37343-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) C. Richard Tucker		Transaction ID: 71005.E4469 Date of Disbursement 09 / 04 / 2007	
Mailing Address P.O. Box 734		Amount of Each Disbursement this Period 325.00	
City Hixson State TN Zip Code 37343-	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TRAVEL	

SUBTOTAL of Disbursements This Page (optional) ▶	2878.65
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Richard Tucker		Transaction ID: 71005.E4541 Date of Disbursement 09 / 28 / 2007	
Mailing Address P.O. Box 734		Amount of Each Disbursement this Period 2097.75	
City Hixson State TN Zip Code 37343-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) B. U.S. Postmaster		Transaction ID: 71005.E4484 Date of Disbursement 08 / 01 / 2007	
Mailing Address 6050 Shallowford Road		Amount of Each Disbursement this Period 928.28	
City Chattanooga State TN Zip Code 37422-	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POSTAGE	

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: 71005.E4485 Date of Disbursement 08 / 01 / 2007	
Mailing Address 6050 Shallowford Road		Amount of Each Disbursement this Period 1000.00	
City Chattanooga State TN Zip Code 37422-	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POSTAGE	

SUBTOTAL of Disbursements This Page (optional) ▶	4026.03
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. U.S. Postmaster		Transaction ID: 71005.E4486 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 7
Mailing Address 6050 Shallowford Road		Amount of Each Disbursement this Period 1230.00
City Chattanooga State TN Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE	Candidate Name	POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. U.S. Postmaster		Transaction ID: 71005.E4537 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 6050 Shallowford Road		Amount of Each Disbursement this Period 410.00
City Chattanooga State TN Zip Code 37422-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement POSTAGE	Candidate Name	POSTAGE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Kim Wamp		Transaction ID: 71005.E4459 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 7
Mailing Address 719 Hawks Nest		Amount of Each Disbursement this Period 4500.00
City Chattanooga State TN Zip Code 37419-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement SALARY	Candidate Name	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6140.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Kim Wamp		Transaction ID: 71005.E4460 Date of Disbursement 07 / 31 / 2007	
Mailing Address 719 Hawks Nest		Amount of Each Disbursement this Period 1340.00	
City Chattanooga State TN Zip Code 37419-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) B. Kim Wamp		Transaction ID: 71005.E4461 Date of Disbursement 08 / 31 / 2007	
Mailing Address 719 Hawks Nest		Amount of Each Disbursement this Period 1340.00	
City Chattanooga State TN Zip Code 37419-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

Full Name (Last, First, Middle Initial) C. Kim Wamp		Transaction ID: 71005.E4540 Date of Disbursement 09 / 28 / 2007	
Mailing Address 719 Hawks Nest		Amount of Each Disbursement this Period 1340.00	
City Chattanooga State TN Zip Code 37419-	Purpose of Disbursement SALARY	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SALARY	

SUBTOTAL of Disbursements This Page (optional) ▶	4020.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Zach Wamp

Full Name (Last, First, Middle Initial) A. Zach Wamp		Transaction ID: 71005.E4462 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 7
Mailing Address 719 Hawks Nest		Amount of Each Disbursement this Period 198.09
City Chattanooga State TN Zip Code 37409-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CANDIDATE TRAVEL	Candidate Name	CANDIDATE TRAVEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Zach Wamp		Transaction ID: 71005.E4463 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 7
Mailing Address 719 Hawks Nest		Amount of Each Disbursement this Period 155.98
City Chattanooga State TN Zip Code 37409-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CANDIDATE TRAVEL	Candidate Name	CANDIDATE TRAVEL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. World Sales		Transaction ID: 71005.E4523 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 7
Mailing Address 5813 Lee Highway		Amount of Each Disbursement this Period 453.39
City Chattanooga State TN Zip Code 37421-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement PROMOTIONAL ITEMS	Candidate Name	PROMOTIONAL ITEMS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	807.46
TOTAL This Period (last page this line number only) ▶	102631.07