

# 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  
Congressman Bart Gordon Committee

ADDRESS (number and street) P.O. Box 2008  
 Check if different than previously reported. (ACC)  
Murfreesboro TN 37133

2. **FEC IDENTIFICATION NUMBER** C00196915  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
TN 06

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

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] 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 Richard F. LaRoche, Jr.

Signature of Treasurer Electronically Filed by Richard F. LaRoche, Jr. Date 07 15 2008

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

Congressman Bart Gordon Committee

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)).....	170840.36	614060.59
(b) Total Contribution Refunds (from Line 20(d)).....	5141.48	5141.48
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	165698.88	608919.11
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	48368.91	159332.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1569.72
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	48368.91	157763.06
8. Cash on Hand at Close of Reporting Period (from Line 27).....	844852.34	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
Congressman Bart Gordon Committee

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	69311.48	131102.41
(i) Itemized (use Schedule A).....	4465.00	5888.00
(ii) Unitemized.....	73776.48	136990.41
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	97063.88	477070.18
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	170840.36	614060.59
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	<b>0.00</b>	<b>0.00</b>
<b>13. LOANS</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	<b>0.00</b>	<b>1569.72</b>
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	<b>7929.40</b>	<b>19088.86</b>
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	<b>178769.76</b>	<b>634719.17</b>

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
**Total This Period**

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

17. OPERATING EXPENDITURES.....	48368.91	159332.78
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.....	5141.48	5141.48
(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)).....	5141.48	5141.48
21. OTHER DISBURSEMENTS.....	27100.00	99000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	80610.39	263474.26

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	746692.97
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	178769.76
25. SUBTOTAL (add Line 23 and Line 24).....	925462.73
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	80610.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	844852.34

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

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

FOR LINE NUMBER: PAGE 5 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

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

Mailing Address 800 Connecticut Ave., NW  
Suite # 600

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00300707

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2007  
**Transaction ID:** 71010.C119726  
 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)  
Alliant Techsystems Employee

Mailing Address Citizenship Fund PAC  
1215 South Clark Street Suite 1510

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00250209

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 31 / 2007  
**Transaction ID:** 70801.C119509  
 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)  
Altria PAC

Mailing Address 120 Park Ave.

City New York State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 08 / 01 / 2007  
**Transaction ID:** 70824.C119513  
 Amount of Each Receipt this Period 2500.00

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Am. Cable Assn PAC

Mailing Address One Parkway Center  
Ste. 212

City State Zip Code  
Pittsburgh PA 15220

FEC ID number of contributing federal political committee. **C** C00364109

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  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119568

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)  
Am. Chemistry Council PAC

Mailing Address 1300 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00252338

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 7 / 2 0 0 7

**Transaction ID:** 71010.C119723

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)  
Am. Fed. State, County, Municipal

Mailing Address Employees, AFL-CIO  
1625 L St., NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

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  
 0 8 / 2 0 / 2 0 0 7

**Transaction ID:** 70824.C119526

Amount of Each Receipt this Period  
2500.00

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
American College of Radiology PAC

Mailing Address 1701 Pennsylvania Ave., NW  
Ste. 610

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00343459

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  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119566

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)  
American Dietetic Association

Mailing Address 1225 I St., NW, Suite 1250

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00143560

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  
 0 9 / 2 9 / 2 0 0 7

**Transaction ID:** 71010.C119715

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 Fed. of Govt. Employees PAC

Mailing Address 80 F Street Nw

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00009936

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  
 0 9 / 2 8 / 2 0 0 7

**Transaction ID:** 71010.C119718

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) ..... ► **4000.00**

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

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

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

FOR LINE NUMBER: PAGE 8 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
American Hospital Association  
Mailing Address 325 Seventh Street NW  
City Washington State DC Zip Code 20004-2802  
FEC ID number of contributing federal political committee. **C** C00106146  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00  
Date of Receipt 09 / 29 / 2007  
Transaction ID: 71010.C119727  
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)  
American Institute of Certified Public  
Mailing Address Accountants Eff. Leg. Comm.  
1455 Pennsylvania Ave., NW  
City Washington State DC Zip Code 20004-1081  
FEC ID number of contributing federal political committee. **C** C00077321  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 27 / 2007  
Transaction ID: 71010.C119719  
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 Maritime Officers AFL-CIO  
Mailing Address Voluntary Political Action Fund  
650 Fourth Ave.  
City Brooklyn State NY Zip Code 11232  
FEC ID number of contributing federal political committee. **C** C00196915  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 09 / 24 / 2007  
Transaction ID: 71010.C119675  
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) ..... ▶ 3000.00  
**TOTAL** This Period (last page this line number only) ..... ▶



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

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

FOR LINE NUMBER: PAGE 9 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

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

Mailing Address 600 Maryland Ave. SW  
Suite 100 West

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 24 / 2007  
**Transaction ID:** 71010.C119672  
 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)  
American Optometric Association PAC

Mailing Address 1505 Prince Street, Suite 300

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 09 / 30 / 2007  
**Transaction ID:** 71015.C119811  
 Amount of Each Receipt this Period 5000.00

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

**C.** Full Name (Last, First, Middle Initial)  
American Society of Plastic Surgeons PAC

Mailing Address 3823 Fordham Road, NW

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. **C** C00249342

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 09 / 05 / 2007  
**Transaction ID:** 70921.C119534  
 Amount of Each Receipt this Period 2500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 8500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Anheuser-Busch PAC

Mailing Address 1776 I Street, NW Suite 200

City Washington State DC Zip Code 20006-3700

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
08 / 10 / 2007

**Transaction ID:** 70824.C119520

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)  
Areva PAC

Mailing Address One Bethesda Center  
4800 Hampden Lane

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00395285

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY  
09 / 24 / 2007

**Transaction ID:** 71010.C119673

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)  
Boeing PAC

Mailing Address 1200 Wilson Blvd.

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
09 / 29 / 2007

**Transaction ID:** 71010.C119733

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) ..... ► 3000.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Bud Cramer For Congress

Mailing Address 5th District, Alabama  
P.O. Box 2621

City State Zip Code  
Huntsville AL 35804

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
963.88

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	2	/	2	0	0	7

**Transaction ID:** 71010.C119709

Amount of Each Receipt this Period  
963.88

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

**B.** Full Name (Last, First, Middle Initial)  
Build Political Action Committee

Mailing Address Natl Assoc. of HomeBuilders  
1201 15th Street NW

City State Zip Code  
Washington DC 20005-2800

FEC ID number of contributing federal political committee. **C** C00000901

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
0	9	/	2	9	/	2	0	0	7

**Transaction ID:** 71010.C119729

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)  
Ceridian Corp. PAC

Mailing Address 3311 East Old Shakopee Road

City State Zip Code  
Minneapolis MN 55425-1640

FEC ID number of contributing federal political committee. **C** C00344127

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
0	9	/	2	1	/	2	0	0	7

**Transaction ID:** 71010.C119552

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) ..... ► **3963.88**

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

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

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

FOR LINE NUMBER: PAGE 12 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Chemical Workers Union (LIVE) PAC  
Mailing Address 1655 W. Market St.  
City Akron State OH Zip Code 44313  
FEC ID number of contributing federal political committee. **C** C00005835  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 300.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 71010.C119545  
Amount of Each Receipt this Period 300.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Cheniere Energy PAC  
Mailing Address 1155 21st Street, NW Suite 300  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00430157  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 08 / 06 / 2007  
Transaction ID: 70824.C119514  
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)  
College of American Pathologists PAC  
Mailing Address 1350 I Street, NW, Ste. 590  
City Washington State DC Zip Code 20005-3305  
FEC ID number of contributing federal political committee. **C** C00274944  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00  
Date of Receipt 09 / 29 / 2007  
Transaction ID: 71010.C119725  
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) ..... ► 2300.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 109

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Cummins Inc Political Action Committee

Mailing Address 601 Pennsylvania Ave., NW  
North Bldg, Ste. 625

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00377952

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  
09 / 21 / 2007

Transaction ID: 71010.C119556

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)  
Doctors Company PAC

Mailing Address 185 Greenwood Road  
P.O. Box 2900

City State Zip Code  
Napa CA 94558-0900

FEC ID number of contributing federal political committee. **C** C00300376

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C119558

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)  
Employees of Northrup Grumman PAC

Mailing Address 1234 6th Street #204

City State Zip Code  
Santa Monica CA 90401

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 24 / 2007

Transaction ID: 70921.C119530

Amount of Each Receipt this Period

2500.00

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Engineers Political Education Comm PAC  
 Mailing Address 1125 Seventeenth Street NW  
 City State Zip Code  
 Washington DC 20036  
 FEC ID number of contributing federal political committee. **C** C00029504  
 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  
 0 9 / 0 5 / 2 0 0 7  
**Transaction ID:** 70921.C119533  
 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)  
General Electric PAC  
 Mailing Address 1299 Pennsylvania Ave. NW Suite 11  
 City State Zip Code  
 Washington DC 20004-2407  
 FEC ID number of contributing federal political committee. **C** C00024869  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 1 / 2 0 0 7  
**Transaction ID:** 71010.C119563  
 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)  
GlaxoSmithKline PAC  
 Mailing Address 5 Moore Drive  
 City State Zip Code  
 Research Triangle NC 27709  
 FEC ID number of contributing federal political committee. **C** C00199703  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 9 / 2 0 0 7  
**Transaction ID:** 71010.C119722  
 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) ..... ► **7500.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Independent Community Bankers

Mailing Address of America PAC  
1 Thomas Cir. NW, Suite 400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00032698

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  
 0 9 / 2 9 / 2 0 0 7

**Transaction ID:** 71010.C119716

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)  
Intergraph Corp. PAC

Mailing Address One Madison Industrial Park

City Huntsville State AL Zip Code 35807

FEC ID number of contributing federal political committee. **C** C00201491

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  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119548

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)  
International Assoc of Firefighters PAC

Mailing Address 1750 New York Avenue, N.W.

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119546

Amount of Each Receipt this Period  
50.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 16 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
League of Conservation Voters PAC

Mailing Address 1707 L Street, NW, Suite 550

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2007  
**Transaction ID:** 71010.C119674  
 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)  
Lockheed-Martin PAC

Mailing Address 1725 Jefferson Davis Hwy  
Crystal Square 2, Suite 300

City Arlington State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 05 / 2007  
**Transaction ID:** 70921.C119532  
 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)  
Manufactured Housing Institute MHI PAC

Mailing Address 2101 Wilson Blvd., Suite 610

City Arlington State VA Zip Code 22201-3062

FEC ID number of contributing federal political committee. **C** C00043463

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2007  
**Transaction ID:** 70921.C119537  
 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) ..... ► 2250.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

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

Mailing Address Crystal Park 3  
2231 Crystal Drive, Ste. 7111

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00429688

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 21 / 2007  
**Transaction ID:** 71010.C119549  
 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)  
Millennium Engineering PAC

Mailing Address Crystal Park 3  
2231 Crystal Drive, Ste. 7111

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00429688

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 21 / 2007  
**Transaction ID:** 71010.C119550  
 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)  
Mirant PAC

Mailing Address 601 13th Street NW, Ste. 850N

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00365007

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 09 / 29 / 2007  
**Transaction ID:** 71010.C119728  
 Amount of Each Receipt this Period: 5000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7000.00**

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

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

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

FOR LINE NUMBER: PAGE 18 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

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

Mailing Address 1919 Pennsylvania Ave., NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2007  
**Transaction ID:** 71010.C119730  
 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)  
Natl Assn. of Psychiatric Health

Mailing Address Systems PAC  
701 13th St., NW, Ste. 950

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107136

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2007  
**Transaction ID:** 71010.C119561  
 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)  
Natl Assoc. of Chain Drug Stores PAC

Mailing Address 413 North Lee St.  
P.O. Box 1417-D49

City Alexandria State VA Zip Code 22313-1480

FEC ID number of contributing federal political committee. **C** C00022368

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2007  
**Transaction ID:** 71010.C119720  
 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) ..... ► 3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 109

(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)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Natl Multi Housing Council PAC

Mailing Address 1850 M Street, NW  
Ste. 540

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00130773

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  
09 / 21 / 2007

Transaction ID: 71010.C119560

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)  
National Air Traffic Controllers PAC

Mailing Address 1150 17th Street, NW, Suite 701

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 29 / 2007

Transaction ID: 71010.C119731

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)  
National Association of

Mailing Address Insurance & Financial Advisors PAC  
2901 Telestar Court

City State Zip Code  
Falls Church VA 22042

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C119554

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) ..... ▶

3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
National Association of Realtors PAC  
Mailing Address 430 N. Michigan Ave.  
City Chicago State IL Zip Code 60611  
FEC ID number of contributing federal political committee. **C** C00030718  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 08 / 10 / 2007  
Transaction ID: 70824.C119521  
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)  
National Cable & Telecommunications PAC  
Mailing Address 25 Massachusetts Ave., NW Ste. 100  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00010082  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00  
Date of Receipt 09 / 29 / 2007  
Transaction ID: 71010.C119734  
Amount of Each Receipt this Period 5000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
National Weather Service  
Mailing Address Employees Organization PAC  
601 Penn Ave., NW, Suite # 900  
City Washington State DC Zip Code 20004  
FEC ID number of contributing federal political committee. **C** C00318311  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 09 / 13 / 2007  
Transaction ID: 70921.C119542  
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) ..... ▶ 7000.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 109

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Nelnet Higher Education PAC

Mailing Address 1726 M Street NW, Suite 701

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00370015

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  
09 / 29 / 2007

Transaction ID: 71010.C119732

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)  
New York Mercantile Exchange PAC

Mailing Address 1050 Connecticut Ave., NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00230185

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 / 30 / 2007

Transaction ID: 71011.C119768

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)  
Parsons PAC

Mailing Address 100 W. Walnut St.

City State Zip Code  
Pasadena CA 91124

FEC ID number of contributing federal political committee. **C** C00103549

Name of Employer Occupation  
Parsons Corporation

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 / 27 / 2007

Transaction ID: 71010.C119724

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Petroleum Marketers Assoc of Am.

Mailing Address Small Business Comm PAC  
1901 N. Fort Myer Dr., Suite 500

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00035204

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 1 / 2 0 0 7

**Transaction ID:** 71010.C119564

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)  
Professional Counseling Fund PAC

Mailing Address 5703 S. Kenwood Avenue

City State Zip Code  
Chicago IL 60637

FEC ID number of contributing federal political committee. **C** C00399717

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  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119565

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)  
Psychiatric Solutions PAC

Mailing Address 6640 Carothers Pkwy.  
Suite 500

City State Zip Code  
Franklin TN 37067

FEC ID number of contributing federal political committee. **C** C00407684

Name of Employer Occupation  
Psychiatric Solutions Exec VP

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  
 0 9 / 1 1 / 2 0 0 7

**Transaction ID:** 70921.C119536

Amount of Each Receipt this Period  
2500.00

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 109

(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)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)

Radiance Tech. PAC

Mailing Address 350 Wynn Dr.

City State Zip Code  
Huntsville AL 35805

FEC ID number of contributing federal political committee. **C** C00372979

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  
09 / 21 / 2007

Transaction ID: 71010.C119547

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)

Raytheon PAC

Mailing Address 1100 Wilson Blvd.  
Ste. 1500

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2008

Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C119567

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)

Sallie Mae, Inc. PAC

Mailing Address 12061 Bluemont Way

City State Zip Code  
Reston VA 20190

FEC ID number of contributing federal political committee. **C** C00331835

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  
09 / 21 / 2007

Transaction ID: 71010.C119555

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) ..... ▶

5000.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Schering-Plough Corporation Better

Mailing Address Government Fund  
1130 Connecticut Ave., NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00108290

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2007  
**Transaction ID:** 71012.C119800  
 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)  
Society of Thoracic Surgeons PAC

Mailing Address 2025 M St.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00325936

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 09 / 27 / 2007  
**Transaction ID:** 71010.C119717  
 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)  
Sparta PAC

Mailing Address 6000 Technology Dr., NW

City Huntsville State AL Zip Code 35805-1955

FEC ID number of contributing federal political committee. **C** C00347401

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2007  
**Transaction ID:** 71010.C119551  
 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) ..... ► 5000.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

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

Mailing Address 1155 21st Street, NW  
Ste. 300

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 21 / 2007  
**Transaction ID:** 71010.C119559  
 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)  
Union of Needletrades, Ind., & Textile

Mailing Address Employment Campaign Committee  
275 Seventh Avenue, 10th Floor

City New York State NY Zip Code 10001

FEC ID number of contributing federal political committee. **C** C00004861

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 09 / 30 / 2007  
**Transaction ID:** 71011.C119769  
 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)  
UST Executives Administrators &

Mailing Address Managers PAC (US Team PAC)  
100 West Putnam Ave.

City Greenwich State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C** C00104851

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2007  
**Transaction ID:** 71010.C119721  
 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) ..... ▶ 4500.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Washington PAC  
Mailing Address 444 N. Capitol St. NW # 712  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00138560  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 71010.C119557  
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)  
Washington Partners PAC  
Mailing Address 1101 Vermont Ave., NW Suite 400  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00412684  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 71010.C119562  
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)  
Waste Management PAC  
Mailing Address 701 Pennsylvania Ave., NW Ste. 950  
City Washington State DC Zip Code 20004  
FEC ID number of contributing federal political committee. **C** C00119008  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 71010.C119553  
Amount of Each Receipt this Period 2500.00  
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) ..... ► 97063.88

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

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

FOR LINE NUMBER: PAGE 27 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Frank Akers  
 Mailing Address 188 Whippoorwill Drive  
 City State Zip Code  
 Oak Ridge TN 37830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Lockheed Martin Vice President  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period: 500.00  
 Transaction ID: 71010.C119663  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Patti Andrews  
 Mailing Address 5707 Bridge Hampton Drive  
 City State Zip Code  
 Powell TN 37849  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 self Homemaker  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period: 250.00  
 Transaction ID: 71010.C119629  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Andy Athy  
 Mailing Address 1310 19th Street, NW  
 City State Zip Code  
 Washington DC 20036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 O'Neill, Athy & Casey Attorney  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period: 500.00  
 Transaction ID: 71010.C119584  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **1250.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Thayer Baine

Mailing Address 4940 Rodman Street, NW

City Washington State DC Zip Code 20016

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

Name of Employer DC Public Schools Occupation Teacher

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2007  
**Transaction ID:** 71012.C119804  
 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)  
Thomas Ballard

Mailing Address 1115 Treymour Way

City Knoxville State TN Zip Code 37922

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 09 / 24 / 2007  
**Transaction ID:** 71010.C119653  
 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)  
Lori Barreras

Mailing Address 7108 Westland Drive

City Knoxville State TN Zip Code 37919

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

Name of Employer Oak Ridge National Laboratory Occupation Human Resources Mgr

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2007  
**Transaction ID:** 71010.C119656  
 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) ..... ► **1250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 109

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
Mel Bass

Mailing Address 3210 Grace St., NW Apt 310

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation  
Vanderbilt Medical Center Director of Federal Relations

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 1 / 2 0 0 7

Transaction ID: 70921.C119541

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)  
Kim Bayliss

Mailing Address 412 First Street, SE Suite 100

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation  
Dutko Group Managing Principal

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 7

Transaction ID: 70801.C119507

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)  
Kelly Beierschmitt

Mailing Address 123 Westview Lane

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
U.T. Battelle Dir. of Envir. Affairs

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

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 4 / 2 0 0 7

Transaction ID: 71010.C119652

Amount of Each Receipt this Period

500.00

Receipt

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

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

1750.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 109

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Lyndon Boozer		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 5533 Devon Road		Transaction ID: 71010.C119571
	City Bethesda	State MD	Zip Code 20814
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer AT & T	Occupation Assistant VP	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Elizabeth Bradley		Date of Receipt MM / DD / YYYY 09 / 30 / 2007
	Mailing Address 2408 Golfcrest Dr.		Transaction ID: 71011.C119767
	City Pearland	State TX	Zip Code 77581
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer n/a	Occupation retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Elizabeth Bradley		Date of Receipt MM / DD / YYYY 09 / 30 / 2007
	Mailing Address 2408 Golfcrest Dr.		Transaction ID: 71011.C119766
	City Pearland	State TX	Zip Code 77581
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer n/a	Occupation retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4600.00	

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

5100.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 109  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Jeffery Branham

Mailing Address P.O. Box 392

City State Zip Code  
Norris TN 37828

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

Name of Employer Occupation  
U.T. Battelle Auditor

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

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2007

Transaction ID: 71010.C119667

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)  
Jeffery Branham

Mailing Address P.O. Box 392

City State Zip Code  
Norris TN 37828

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

Name of Employer Occupation  
U.T. Battelle Auditor

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

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2007

Transaction ID: 71010.C119666

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)  
Michelle Buchanan

Mailing Address 11409 Morgan Overlook Drive

City State Zip Code  
Knoxville TN 37931

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

Name of Employer Occupation  
Oak Ridge National Laboratory executive

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

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2007

Transaction ID: 71010.C119658

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) ..... ▶ **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Aaron Calodney  
Mailing Address P.O. Box 130577

City State Zip Code  
Tyler TX 75713

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

Name of Employer self Occupation  
Physician

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

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2007

Transaction ID: 70801.C119508

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)  
James Campbell  
Mailing Address 122 Center Park Lane

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer East TN Economic Council Occupation  
President

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

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C119596

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)  
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. Associates Occupation  
President

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

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

Transaction ID: 71010.C119616

Amount of Each Receipt this Period  
500.00

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

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

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



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

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

FOR LINE NUMBER: PAGE 33 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Steve Champlin

Mailing Address 2100 Pennsylvania Ave., NW  
Suite 500

City Washington State DC Zip Code 20037

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

Name of Employer Duberstein Group, Inc. Occupation VP

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 09 / 27 / 2007  
**Transaction ID:** 71010.C119707  
 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)  
Dana Christensen

Mailing Address 408 Cayuga Drive

City Loudon State TN Zip Code 37774

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2007  
**Transaction ID:** 71010.C119662  
 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)  
Frank Collazo

Mailing Address 6726 Odyssey Drive

City Huntsville State AL Zip Code 35806

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

Name of Employer Collazo Enterprises Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 21 / 2007  
**Transaction ID:** 71010.C119765  
 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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Frank Collazo

Mailing Address 6726 Odyssey Drive

City State Zip Code  
Huntsville AL 35806

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

Name of Employer Collazo Enterprises      Occupation President

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119591

Amount of Each Receipt this Period  
2000.00

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

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

Mailing Address 225 Collins Ln

City State Zip Code  
Portland TN 37148-5204

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

Name of Employer Collins Construction Co.      Occupation Owner

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

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

**Transaction ID:** 70824.C119516

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)  
Rolland Collins

Mailing Address P.O. Box 1271

City State Zip Code  
Wartburg TN 37887

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

Name of Employer Occupation  
Requested

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119570

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) ..... ► **4800.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 109

(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)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jim Copeland

Mailing Address 4287 Embassy Park Dr NW

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. C

Name of Employer CJ Strategies Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2007

**Transaction ID:** 71010.C119576

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)  
Clyde Craven

Mailing Address 113 Wiltshire Drive

City Oak Ridge State TN Zip Code 37830

FEC ID number of contributing federal political committee. C

Name of Employer All Meds Occupation Executive Director

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2007

**Transaction ID:** 71010.C119647

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)  
Mickey Crutcher

Mailing Address 105 Coveshire Place

City Madison State AL Zip Code 35758

FEC ID number of contributing federal political committee. C

Name of Employer Maximum Technology Corp. Occupation Pres. & CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 21 / 2007

**Transaction ID:** 71010.C119592

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) ..... 3000.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Carl Dalstrom

Mailing Address 3739 Doty Lane

City State Zip Code  
Carmel IN 46033

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

Name of Employer Occupation  
USA Group CEO

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

**Transaction ID:** 71010.C119582

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)  
H.L. Debban

Mailing Address 690 Oak Chase Blvd.

City State Zip Code  
Lenoir City TN 37772

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

Name of Employer Occupation  
Battelle Deputy Manager

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 24 / 2007

**Transaction ID:** 71010.C119660

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)  
Carrol Dee

Mailing Address 11413 Berry Hill Drive

City State Zip Code  
Knoxville TN 37931

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

Name of Employer Occupation  
GeoQuill Services President

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2007

**Transaction ID:** 71015.C119812

Amount of Each Receipt this Period  
250.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

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

Mailing Address 11413 Berry Hill Drive

City State Zip Code  
Knoxville TN 37931

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

Name of Employer Occupation  
GeoQuill Services C.E.O.

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

**Transaction ID:** 71010.C119606

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)  
Homer Fisher

Mailing Address 183 Dusty Lane

City State Zip Code  
Powell TN 37849

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

Name of Employer Occupation  
UT Senior V.P.

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 24 / 2007

**Transaction ID:** 71010.C119648

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)  
Jim Free

Mailing Address 1401 K St. NW, Suite 1200

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation  
The Smith-Free Group Partner

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

**Transaction ID:** 71010.C119600

Amount of Each Receipt this Period  
750.00

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

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Jenny Freeman  
Mailing Address 371 East Drive  
City State Zip Code  
Oak Ridge TN 37830  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
ETEBA Executive Director  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7  
Transaction ID: 71010.C119608  
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)  
Brad Gilman  
Mailing Address 2300 Clarendon Blvd. Ste. 1010  
Arlington Courthouse Plaza II  
City State Zip Code  
Arlington VA 22201  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Robertson, Monagle, & Eas- taugh Attorney  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 350.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7  
Transaction ID: 71010.C119577  
Amount of Each Receipt this Period  
350.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Warren Gooch  
Mailing Address 18 Palisades Parkway  
City State Zip Code  
Oak Ridge TN 37830  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
self Attorney  
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  
0 9 / 2 1 / 2 0 0 7  
Transaction ID: 71010.C119605  
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) ..... ► 1600.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 109

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Karen Goss

Mailing Address 2301 Clipper Lane

City State Zip Code  
Knoxville TN 37922

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

Name of Employer Occupation  
Pro2Serve V.P.

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C119603

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 Haines

Mailing Address 502 Rolling Creek Road

City State Zip Code  
Knoxville TN 37922

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

Name of Employer Occupation  
U.T. Battelle Dir. Neutron Facilities

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 24 / 2007

Transaction ID: 71010.C119649

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)  
Standiford Helm

Mailing Address 1808 Calle De Los Alamos

City State Zip Code  
San Clemente CA 92672

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

Name of Employer Occupation  
self Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 26 / 2007

Transaction ID: 70801.C119506

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) ..... ▶

2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Stuart Henderson

Mailing Address 11911 Burnside Place

City State Zip Code  
Knoxville TN 37922

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

Name of Employer ORNL Occupation 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  
 0 9 / 2 4 / 2 0 0 7

**Transaction ID:** 71010.C119655

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)  
Tom Hill

Mailing Address 105 Westlook Circle

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer n/a Occupation retired

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  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119609

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)  
Paul Hoff

Mailing Address 110 Cheekwood Drive

City State Zip Code  
Madison AL 35758

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

Name of Employer Davidson Technologies Occupation C.E.O.

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  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119590

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)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Doug Horne

Mailing Address 412 North Cedar Bluff Road  
Suite 205

City State Zip Code  
Knoxville TN 37923-3609

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

Name of Employer Occupation  
Horne Properties, Inc President

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119628

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)  
Jeffrey Irons

Mailing Address 2251 Governors Bend Rd.

City State Zip Code  
Huntsville AL 35801

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

Name of Employer Occupation  
self Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119594

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)  
Carol Jankowsky

Mailing Address 1333 New Hampshire Ave., NW

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation  
n/a Homemaker

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119572

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 109  
(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)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
James Jones

Mailing Address 317 East Capitol Street

City Washington State DC Zip Code 20003

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

Name of Employer Manatt, Jones Global Occupation Co-Chairman

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2007

Transaction ID: 71010.C119580

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)  
Steve Jones

Mailing Address 1912 Wayside Road

City Knoxville State TN Zip Code 37931

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

Name of Employer City of Clinton Occupation Manager

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 635.00

Date of Receipt 09 / 21 / 2007

Transaction ID: 71010.C119633

Amount of Each Receipt this Period 635.00

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

**C.**

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

Mailing Address 1620 Belvedere Blvd.

City Silver Spring State MD Zip Code 20902

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

Name of Employer Dow Lohnes Strategies Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2007

Transaction ID: 71010.C119575

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) ..... ► **1635.00**

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

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

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

FOR LINE NUMBER: PAGE 43 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Albert Killen  
Mailing Address 161 Nale Drive  
City Madison State AL Zip Code 35758  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Morgan Research Occupation CEO  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 71010.C119588  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Frank Kornegay  
Mailing Address 143 Tanasi Trail  
City Kingston State TN Zip Code 37763  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ORNL Occupation SNSO  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 71010.C119644  
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)  
Tim Locke  
Mailing Address 2111 Woodmont Rd.  
City Alexandria State VA Zip Code 22307  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Smith-Free Group Occupation Senior VP  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 71010.C119598  
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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Karen Mann  
 Mailing Address 731 Summit Lake Court  
 City State Zip Code  
 Knoxville TN 37922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 U.T. Battelle Lab Director  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period: 500.00  
 Transaction ID: 71010.C119664  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thom Mason  
 Mailing Address 171 Whippoorwill Drive  
 City State Zip Code  
 Oak Ridge TN 37831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Oak Ridge National Laboratory Director  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period: 1141.48  
 Transaction ID: 71010.C119708  
 In-Kind  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Henri McDaniel  
 Mailing Address 223 East Side Sq.  
 City State Zip Code  
 Huntsville AL 35801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 self Attorney  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period: 1000.00  
 Transaction ID: 71010.C119587  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2641.48**  
**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 109
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Don Miller	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 164 Stoneway Trail	<b>Transaction ID:</b> 71010.C119589
	City State Zip Code Madison AL 35758	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Miltec President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Moore	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 5402 Morris Neck Road	<b>Transaction ID:</b> 71010.C119583
	City State Zip Code Cambridge MD 21613	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Coda Octopus Group Senior VP Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Elizabeth Morard	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 5000 Bradford Drive, Suite. 3	<b>Transaction ID:</b> 71010.C119585
	City State Zip Code Huntsville AL 35805	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Qualis Corp. Pres. & CEO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 109

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Terry Muilenburg

Mailing Address 2000 L St., NW Ste. 402

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. C

Name of Employer USA Group Occupation Government Affairs

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2007

**Transaction ID:** 71010.C119581

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)  
Alice Murphy

Mailing Address 176 Appletree Drive

City Clinton State TN Zip Code 37716

FEC ID number of contributing federal political committee. C

Name of Employer Energy, Tech. & Env. Assoc. Occupation Executive Director

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2007

**Transaction ID:** 71010.C119651

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)  
Ralph Nurnberger

Mailing Address 4870F Old Dominion Drive

City Arlington State VA Zip Code 22207

FEC ID number of contributing federal political committee. C

Name of Employer Georgetown Univ. Occupation Professor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2007

**Transaction ID:** 71010.C119579

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) ..... 750.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 109

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bentley Ogoke		Date of Receipt MM / DD / YYYY 08 / 06 / 2007
	Mailing Address 116 Hunters Greene Circle		<b>Transaction ID:</b> 70824.C119515
	City Agawam	State MA	Zip Code 01001-3683
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Northern Pain Mgmt Center, Inc		Occupation Physician	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Tim Pickens		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 104 Lindell Drive		<b>Transaction ID:</b> 71010.C119593
	City Madison	State AL	Zip Code 35758
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Orion Propulsion		Occupation CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Tony Podesta		Date of Receipt MM / DD / YYYY 08 / 01 / 2007
	Mailing Address 2651 Woodley Road, NW		<b>Transaction ID:</b> 70824.C119511
	City Washington	State DC	Zip Code 20008
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The Podesta Group		Occupation consultant	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1400.00		

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 109

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Nicole Porter

Mailing Address 105 Antioch Drive

City State Zip Code  
Oak Ridge TN 37830

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Oak Ridge National Laboratory Senior Aide

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2007

**Transaction ID:** 71010.C119657

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)  
Pat Powell

Mailing Address 109 Mockingbird Lane

City State Zip Code  
Oak Ridge TN 37830-8282

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
I.I.A Senior VP

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

**Transaction ID:** 71010.C119613

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)  
Nathaniel Revis

Mailing Address 1060 West Outer Drive

City State Zip Code  
Oak Ridge TN 37830

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Oak Ridge National Lab Scientist

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2007

**Transaction ID:** 71010.C119650

Amount of Each Receipt this Period  
250.00

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

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

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

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

Mailing Address 520 Old Tavern Circle

City State Zip Code  
Farragut TN 37922

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

Name of Employer Occupation  
U.T. Battelle Director Physical & Comp.

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

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2007

**Transaction ID:** 71010.C119669

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)  
Thomas Rogers

Mailing Address 1925 Cherokee Boulevard

City State Zip Code  
Knoxville TN 37919

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

Name of Employer Occupation  
Technology 2020 Executive Director

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

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2007

**Transaction ID:** 71010.C119601

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)  
Miles Rubin

Mailing Address 3035 Chain Bridge Road, NW

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation  
Miles Automotive Group Chairman

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

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2007

**Transaction ID:** 70824.C119510

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) ..... ► **1750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 109
	<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)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ned Sauthoff	Date of Receipt MM / DD / YYYY 09 / 24 / 2007
	Mailing Address 107-J Gates Drive	<b>Transaction ID:</b> 71010.C119668
	City State Zip Code Oak Ridge TN 37830	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer ORNL	Occupation Director	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Brian Ginam Sewell	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 4344 Aylesbury Drive	<b>Transaction ID:</b> 71010.C119602
	City State Zip Code Knoxville TN 37918	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation	Occupation Requested	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ashok Singhal	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 1613 Chandler Rd. SE	<b>Transaction ID:</b> 71010.C119586
	City State Zip Code Huntsville AL 35801	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer CFD Research Corp.	Occupation President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Alicia Smith  
Mailing Address 1401 K Street, NW, Suite 1200  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Smith-Free Group Occupation Senior Vice President  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 500.00  
Date of Receipt 09 / 21 / 2007  
Transaction ID: 71010.C119574  
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)  
Jeff Smith  
Mailing Address 1950 Chiswick Road  
City Knoxville State TN Zip Code 37922  
FEC ID number of contributing federal political committee. **C**  
Name of Employer U.T. Battelle Occupation executive  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 500.00  
Date of Receipt 09 / 24 / 2007  
Transaction ID: 71010.C119670  
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)  
Melanie Somerville  
Mailing Address 1503 Palmer Drive  
City Laredo State TX Zip Code 78045  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pain Management Clinic Occupation Office Manager  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 500.00  
Date of Receipt 09 / 30 / 2007  
Transaction ID: 71012.C119805  
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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Billy Stair

Mailing Address 1612 Redgrave Road

City State Zip Code  
Knoxville TN 37922

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

Name of Employer Occupation  
Oak Ridge National Lab Director of Communications

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  
 0 9 / 2 4 / 2 0 0 7

**Transaction ID:** 71010.C119665

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)  
Bear Stephenson

Mailing Address 114 Sinking Springs Rd.

City State Zip Code  
Clinton TN 37716

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

Name of Employer Occupation  
self Realtor & Auctioneer

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  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119595

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)  
Wayne Stevenson

Mailing Address 122 Hazleton Lane

City State Zip Code  
Oak Ridge TN 37830

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

Name of Employer Occupation  
ORAU Program 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  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119614

Amount of Each Receipt this Period  
250.00

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 109
	<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)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Carl Strawbridge	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address P.O. Box 2008	<b>Transaction ID:</b> 71010.C119611
	City State Zip Code Oak Ridge TN 37831	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer U.T. Battelle	Occupation executive	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ronald Townsend	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 107 William Lane	<b>Transaction ID:</b> 71010.C119645
	City State Zip Code Oak Ridge TN 37830	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer ORAU	Occupation President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Greg Turner	Date of Receipt MM / DD / YYYY 09 / 24 / 2007
	Mailing Address 5616 Glenlyn Dr.	<b>Transaction ID:</b> 71010.C119659
	City State Zip Code Powell TN 37849	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer U.T. Battelle	Occupation CFO Business & Info. Sys.	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 109

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Robert Van Hook

Mailing Address 698 Anglers Cove Rd.

City State Zip Code  
Kingston TN 37763

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Lockheed Martin President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
09 / 21 / 2007

**Transaction ID:** 71010.C119599

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)  
Sheila Webster

Mailing Address 942 Ethans Glen Drive

City State Zip Code  
Knoxville TN 37923

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
UT EERC Director

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
09 / 21 / 2007

**Transaction ID:** 71010.C119634

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)  
Tom Wheeler

Mailing Address 1196 Blockhouse Valley Road

City State Zip Code  
Clinton TN 37716

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
A & S Building Systems Manager

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
09 / 21 / 2007

**Transaction ID:** 71010.C119604

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) ..... 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 109
	<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)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jacqueline Whiteside	Date of Receipt MM / DD / YYYY 09 / 21 / 2007
	Mailing Address 1937 Stonebrook Drive	<b>Transaction ID:</b> 71010.C119597
	City State Zip Code Knoxville TN 37923	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer n/a Occupation Homemaker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Garry Whitley	Date of Receipt MM / DD / YYYY 09 / 24 / 2007
	Mailing Address 514 Mariner Point Drive	<b>Transaction ID:</b> 71010.C119654
	City State Zip Code Clinton TN 37716	Amount of Each Receipt this Period 635.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Atomic Trades & Labor Cou- n. Occupation President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 635.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeff Whorley	Date of Receipt MM / DD / YYYY 09 / 30 / 2007
	Mailing Address 4245 North Meridian	<b>Transaction ID:</b> 71010.C119710
	City State Zip Code Indianapolis IN 46208	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer self Occupation Investments Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4935.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 56 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Jeff Whorley  
Mailing Address 4245 North Meridian  
City Indianapolis State IN Zip Code 46208  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation Investments  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4600.00  
Date of Receipt 09 / 30 / 2007  
Transaction ID: 71010.C119711  
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)  
Lisa Whorley  
Mailing Address 4245 North Meridian  
City Indianapolis State IN Zip Code 46208  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation CPA  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 09 / 30 / 2007  
Transaction ID: 71010.C119712  
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)  
Lisa Whorley  
Mailing Address 4245 North Meridian  
City Indianapolis State IN Zip Code 46208  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation CPA  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4600.00  
Date of Receipt 09 / 30 / 2007  
Transaction ID: 71010.C119713  
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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 109  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Katherine Woods

Mailing Address 171 N. Berwick Lane

City State Zip Code  
Franklin TN 37069

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

Name of Employer Occupation  
Occupation Requested

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  
 0 8 / 2 0 / 2 0 0 7

**Transaction ID:** 70824.C119528

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)  
Andy Wright

Mailing Address 412 1st Street, SE Ste. 100

City State Zip Code  
Washington DC 20003-1804

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

Name of Employer Occupation  
Dutko Group Vice President

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  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119573

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)  
Carl Wright

Mailing Address 111 Partridge Place

City State Zip Code  
Clinton TN 37716

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

Name of Employer Occupation  
Oak Ridge National Laboratory Vice President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 1 / 2 0 0 7

**Transaction ID:** 71010.C119620

Amount of Each Receipt this Period  
700.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 109
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial) Thomas Zacharia		Date of Receipt MM / DD / YYYY 09 / 24 / 2007
Mailing Address 21616 Beals Chapel Road		Transaction ID: 71010.C119661
City Lenoir City	State TN	Zip Code 37772
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer ORNL	Occupation Exec.	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Alexander Zucker		Date of Receipt MM / DD / YYYY 09 / 22 / 2007
Mailing Address 103 Orange Lane		Transaction ID: 71015.C119827
City Oak Ridge	State TN	Zip Code 37830
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	69311.48

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 109  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
First National Bank

Mailing Address 1386 North Main Street

City State Zip Code  
Crossville TN 38555-4082

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1154.57

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

Transaction ID: 70712.C119496

Amount of Each Receipt this Period  
567.82

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

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

Mailing Address 1386 North Main Street

City State Zip Code  
Crossville TN 38555-4082

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1741.32

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

Transaction ID: 70824.C119517

Amount of Each Receipt this Period  
586.75

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

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

Mailing Address 1386 North Main Street

City State Zip Code  
Crossville TN 38555-4082

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2328.07

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 7

Transaction ID: 70921.C119539

Amount of Each Receipt this Period  
586.75

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1741.32**

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

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

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

FOR LINE NUMBER: PAGE 60 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
First Tennessee Bank

Mailing Address 305 West Northfield Boulevard

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1823.29

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	6	/	2	0	0	7

**Transaction ID:** 70801.C119501

Amount of Each Receipt this Period  
226.03

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

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

Mailing Address 305 West Northfield Boulevard

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2041.09

Date of Receipt  

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

**Transaction ID:** 70801.C119504

Amount of Each Receipt this Period  
217.80

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

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

Mailing Address 305 West Northfield Boulevard

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2274.65

Date of Receipt  

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

**Transaction ID:** 70824.C119523

Amount of Each Receipt this Period  
233.56

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **677.39**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 109  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
First Tennessee Bank

Mailing Address 305 West Northfield Boulevard

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2499.72

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

**Transaction ID:** 70824.C119529

Amount of Each Receipt this Period  
225.07

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

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

Mailing Address 305 West Northfield Boulevard

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2733.28

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2007

**Transaction ID:** 70921.C119544

Amount of Each Receipt this Period  
233.56

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

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

Mailing Address 305 West Northfield Boulevard

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2958.35

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2007

**Transaction ID:** 71010.C119676

Amount of Each Receipt this Period  
225.07

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 683.70

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 109  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Pinnacle Bank

Mailing Address 114 West College Street

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2007

Transaction ID: 70710.C119490

Amount of Each Receipt this Period  
431.51

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

3480.83

**B.**

Full Name (Last, First, Middle Initial)  
Pinnacle Bank

Mailing Address 114 West College Street

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2007

Transaction ID: 70824.C119518

Amount of Each Receipt this Period  
445.89

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

3926.72

**C.**

Full Name (Last, First, Middle Initial)  
Pinnacle Bank

Mailing Address 114 West College Street

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
09 / 11 / 2007

Transaction ID: 70921.C119538

Amount of Each Receipt this Period  
445.89

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

4372.61

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1323.29**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Regions Bank  
Mailing Address 1 City Center Boulevard

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1747.77

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	4	/	2	0	0	7

**Transaction ID:** 70801.C119505  
 Amount of Each Receipt this Period 693.57

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

**B.** Full Name (Last, First, Middle Initial)  
Regions Bank  
Mailing Address 1 City Center Boulevard

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1957.55

Date of Receipt  

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

**Transaction ID:** 70921.C119531  
 Amount of Each Receipt this Period 209.78

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

**C.** Full Name (Last, First, Middle Initial)  
Regions Bank  
Mailing Address 1 City Center Boulevard

City State Zip Code  
Murfreesboro TN 37130-

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

Name of Employer Interest on Occupation  
Certificate of Deposit

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2167.33

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	9	/	2	0	0	7

**Transaction ID:** 71010.C119714  
 Amount of Each Receipt this Period 209.78

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1113.13**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 109  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.** Full Name (Last, First, Middle Initial)  
Volunteer State Bank  
Mailing Address 101 Highway 52 West  
City Portland State TN Zip Code 37148-1407  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Interest on Occupation Certificate of Deposit  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 437.14  
Date of Receipt 09 / 13 / 2007  
Transaction ID: 70921.C119543  
Amount of Each Receipt this Period 437.14  
Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Wilson Bank & Trust  
Mailing Address 3110 Memorial Blvd  
City Murfreesboro State TN Zip Code 37129-5117  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Interest on Occupation Certificate of Deposit  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2098.98  
Date of Receipt 07 / 19 / 2007  
Transaction ID: 70801.C119502  
Amount of Each Receipt this Period 226.03  
Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Wilson Bank & Trust  
Mailing Address 3110 Memorial Blvd  
City Murfreesboro State TN Zip Code 37129-5117  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Interest on Occupation Certificate of Deposit  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2332.54  
Date of Receipt 08 / 20 / 2007  
Transaction ID: 70824.C119525  
Amount of Each Receipt this Period 233.56  
Other Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 896.73  
**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 109

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

**A.**

Full Name (Last, First, Middle Initial)  
Wilson Bank & Trust

Mailing Address 3110 Memorial Blvd

City	State	Zip Code
Murfreesboro	TN	37129-5117

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

Name of Employer Interest on	Occupation
	Certificate of Deposit

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	2566.10

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: 71010.C119569

Amount of Each Receipt this Period  
233.56

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

**B.**

Full Name (Last, First, Middle Initial)  
Bank of Putnam County

Mailing Address P.O. Box 2809

City	State	Zip Code
Cookeville	TN	38501-

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

Name of Employer Interest on	Occupation
	Certificate of Deposit

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	3315.08

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 12 / 2007

Transaction ID: 70712.C119497

Amount of Each Receipt this Period  
410.96

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

**C.**

Full Name (Last, First, Middle Initial)  
Bank of Putnam County

Mailing Address P.O. Box 2809

City	State	Zip Code
Cookeville	TN	38501-

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

Name of Employer Interest on	Occupation
	Certificate of Deposit

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify) ▼	3739.74

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

Transaction ID: 70824.C119519

Amount of Each Receipt this Period  
424.66

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

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

1069.18

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 66 / 109	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of Putnam County		Date of Receipt
	Mailing Address P.O. Box 2809		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Cookeville	TN	38501-
	FEC ID number of contributing federal political committee.		Transaction ID: 70921.C119540
Name of Employer Interest on		Amount of Each Receipt this Period	
Occupation		<input type="text" value="424.66"/>	
Certificate of Deposit		Other Receipt	
Election Cycle-to-Date ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="4164.40"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="424.66"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="7929.40"/>

# 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)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Amanda Amick	Transaction ID: 70801.E18939
	Mailing Address 142 Wolverine Court	Date of Disbursement MM / DD / YYYY 07 / 16 / 2007
	City Smyrna State TN Zip Code 37167-	Amount of Each Disbursement this Period 386.32
	Purpose of Disbursement wages	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WAGES

B.	Full Name (Last, First, Middle Initial) Amanda Amick	Transaction ID: 70824.E18991
	Mailing Address 142 Wolverine Court	Date of Disbursement MM / DD / YYYY 08 / 01 / 2007
	City Smyrna State TN Zip Code 37167-	Amount of Each Disbursement this Period 474.34
	Purpose of Disbursement wages	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WAGES

C.	Full Name (Last, First, Middle Initial) Amanda Amick	Transaction ID: 70824.E19009
	Mailing Address 142 Wolverine Court	Date of Disbursement MM / DD / YYYY 08 / 15 / 2007
	City Smyrna State TN Zip Code 37167-	Amount of Each Disbursement this Period 343.95
	Purpose of Disbursement wages	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WAGES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1204.61
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Amanda Amick	Transaction ID: 70921.E19061 Date of Disbursement 08 / 30 / 2007
	Mailing Address 142 Wolverine Court	Amount of Each Disbursement this Period 757.23
	City Smyrna State TN Zip Code 37167-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WAGES

B.	Full Name (Last, First, Middle Initial) Amanda Amick	Transaction ID: 71011.E19108 Date of Disbursement 09 / 14 / 2007
	Mailing Address 142 Wolverine Court	Amount of Each Disbursement this Period 672.22
	City Smyrna State TN Zip Code 37167-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WAGES

C.	Full Name (Last, First, Middle Initial) Amanda Amick	Transaction ID: 71011.E19117 Date of Disbursement 09 / 28 / 2007
	Mailing Address 142 Wolverine Court	Amount of Each Disbursement this Period 875.36
	City Smyrna State TN Zip Code 37167-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WAGES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2304.81
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Comcast Cable TV	Transaction ID: 70627.E18894 Date of Disbursement 07 / 01 / 2007
	Mailing Address 2950 Kraft Drive, Ste. 100	Amount of Each Disbursement this Period 67.98
	City Nashville State TN Zip Code 37204-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement cable service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CABLE SERVICE

B.	Full Name (Last, First, Middle Initial) Comcast Cable TV	Transaction ID: 70824.E18996 Date of Disbursement 08 / 01 / 2007
	Mailing Address 2950 Kraft Drive, Ste. 100	Amount of Each Disbursement this Period 67.98
	City Nashville State TN Zip Code 37204-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement cable service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CABLE SERVICE

C.	Full Name (Last, First, Middle Initial) Comcast Cable TV	Transaction ID: 70921.E19052 Date of Disbursement 08 / 28 / 2007
	Mailing Address 2950 Kraft Drive, Ste. 100	Amount of Each Disbursement this Period 67.98
	City Nashville State TN Zip Code 37204-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement cable service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CABLE SERVICE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	203.94
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Chase Credit Card Services	Transaction ID: 70627.E18897 Date of Disbursement 07 / 01 / 2007
	Mailing Address P.O. Box 940414	Amount of Each Disbursement this Period 894.27
	City Palatine State IL Zip Code 60094-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CREDIT CARD: SEE BELOW	CREDIT CARD: SEE BELOW
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Target Store	Transaction ID: 70627.E18904 Date of Disbursement 06 / 26 / 2007
	Mailing Address 1851 Old Fort Pkwy	Amount of Each Disbursement this Period 24.91
	City Murfreesboro State TN Zip Code 37129-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies	[MEMO ITEM] MEMO: 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) ▼

C.	Full Name (Last, First, Middle Initial) Bistro Bis	Transaction ID: 70627.E18903 Date of Disbursement 06 / 26 / 2007
	Mailing Address 15 E. St. NW	Amount of Each Disbursement this Period 543.15
	City Washington State DC Zip Code 20001-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement reception expense	[MEMO ITEM] MEMO: RECEPTION EXPENSE
	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) ..... ▶

894.27

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)  
Congressman Bart Gordon Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Office Depot Mailing Address 620 Ridgely Rd. City Murfreesboro State TN Zip Code 37129- Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 70627.E18901 Date of Disbursement 06 / 26 / 2007
	Amount of Each Disbursement this Period 87.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES

<b>B.</b> Full Name (Last, First, Middle Initial) Office Depot Mailing Address 620 Ridgely Rd. City Murfreesboro State TN Zip Code 37129- Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 70627.E18902 Date of Disbursement 06 / 26 / 2007
	Amount of Each Disbursement this Period 28.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES

<b>C.</b> Full Name (Last, First, Middle Initial) Chase Credit Card Services Mailing Address P.O. Box 940414 City Palatine State IL Zip Code 60094- Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 70710.E18921 Date of Disbursement 07 / 01 / 2007
	Amount of Each Disbursement this Period 3785.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CREDIT CARD: SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3785.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Chase Credit Card Services Mailing Address P.O. Box 940414 City Palatine State IL Zip Code 60094- Purpose of Disbursement annual membership fee 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: 70710.E18912 Date of Disbursement 06 / 28 / 2007
	Amount of Each Disbursement this Period 59.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: ANNUAL MEMBERSHIP FEE

<b>B.</b> Full Name (Last, First, Middle Initial) Puleos Grill Mailing Address 730 NW Broad St. City Murfreesboro State TN Zip Code 37129- Purpose of Disbursement staff meals 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: 70710.E18916 Date of Disbursement 06 / 28 / 2007
	Amount of Each Disbursement this Period 35.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: STAFF MEALS

<b>C.</b> Full Name (Last, First, Middle Initial) Hotel Healdsburg Mailing Address 25 Matheson Street City Healdsburg State CA Zip Code 95448- Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70710.E18910 Date of Disbursement 06 / 28 / 2007
	Amount of Each Disbursement this Period 1923.37 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: 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)

<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)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Park Hyatt Hotel	Transaction ID: 70710.E18908 Date of Disbursement 06 / 28 / 2007
	Mailing Address 24 & M Streets, NW	Amount of Each Disbursement this Period 843.00
	City Washington State DC Zip Code 20036-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel	<b>[MEMO ITEM]</b> MEMO: TRAVEL
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) T-Mobile Phone Service	Transaction ID: 70710.E18914 Date of Disbursement 06 / 28 / 2007
	Mailing Address 1810 Old Fort Parkway Suite D	Amount of Each Disbursement this Period 438.99
	City Murfreesboro State TN Zip Code 37130-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement mobile phone service	<b>[MEMO ITEM]</b> MEMO: MOBILE PHONE SERVICE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) T-Mobile Phone Service	Transaction ID: 70710.E18915 Date of Disbursement 06 / 28 / 2007
	Mailing Address 1810 Old Fort Parkway Suite D	Amount of Each Disbursement this Period 119.11
	City Murfreesboro State TN Zip Code 37130-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement mobile phone service	<b>[MEMO ITEM]</b> MEMO: MOBILE PHONE SERVICE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Kinkeads Restaurant	Transaction ID: 70710.E18918 Date of Disbursement 06 / 28 / 2007
	Mailing Address 2000 Pennsylvania Ave., NW	Amount of Each Disbursement this Period 131.93
	City Washington State DC Zip Code 20006-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement fundraising planning meeting	<b>[MEMO ITEM]</b> MEMO: FUNDRAISING PLANNING MEETING
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chase Credit Card Services	Transaction ID: 70710.E18920 Date of Disbursement 07 / 01 / 2007
	Mailing Address P.O. Box 940414	Amount of Each Disbursement this Period 59.00
	City Palatine State IL Zip Code 60094-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement no vendor over \$200.00	NO VENDOR OVER \$200.00
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chase Credit Card Services	Transaction ID: 70801.E18972 Date of Disbursement 07 / 19 / 2007
	Mailing Address P.O. Box 940414	Amount of Each Disbursement this Period 6097.03
	City Palatine State IL Zip Code 60094-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CREDIT CARD: SEE BELOW	CREDIT CARD: SEE BELOW
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6156.03</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
US Airways

Mailing Address 25 North Goodwin Avenue

City Kingston State PA Zip Code 18704-

Purpose of Disbursement  
travel expense  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70801.E18962  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	7	

Amount of Each Disbursement this Period

337.30
--------

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

**[MEMO ITEM]**  
MEMO: TRAVEL EXPENSE

B.

Full Name (Last, First, Middle Initial)  
US Airways

Mailing Address 25 North Goodwin Avenue

City Kingston State PA Zip Code 18704-

Purpose of Disbursement  
travel expense  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70801.E18961  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	7	

Amount of Each Disbursement this Period

337.30
--------

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

**[MEMO ITEM]**  
MEMO: TRAVEL EXPENSE

C.

Full Name (Last, First, Middle Initial)  
Bistro Bis

Mailing Address 15 E. St. NW

City Washington State DC Zip Code 20001-

Purpose of Disbursement  
reception expense  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70801.E18963  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	7	

Amount of Each Disbursement this Period

2140.20
---------

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

**[MEMO ITEM]**  
MEMO: RECEPTION EXPENSE

SUBTOTAL of Disbursements This Page (optional) ..... ▶

0.00
------

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bistro Bis  Mailing Address 15 E. St. NW  City Washington State DC Zip Code 20001-  Purpose of Disbursement reception expense 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: 70801.E18964 Date of Disbursement 07 / 19 / 2007  Amount of Each Disbursement this Period 1712.50  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: RECEPTION EXPENSE
<b>B.</b>	Full Name (Last, First, Middle Initial) Bistro Bis  Mailing Address 15 E. St. NW  City Washington State DC Zip Code 20001-  Purpose of Disbursement reception expense 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: 70801.E18965 Date of Disbursement 07 / 19 / 2007  Amount of Each Disbursement this Period 1181.45  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: RECEPTION EXPENSE
<b>C.</b>	Full Name (Last, First, Middle Initial) Chase Credit Card Services  Mailing Address P.O. Box 940414  City Palatine State IL Zip Code 60094-  Purpose of Disbursement annual membership fee 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: 70801.E18971 Date of Disbursement 07 / 19 / 2007  Amount of Each Disbursement this Period 59.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: ANNUAL MEMBERSHIP FEE

**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)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address 620 Ridgely Rd.

City Murfreesboro State TN Zip Code 37129-

Purpose of Disbursement  
office supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 70801.E18967  
Date of Disbursement

07 / 19 / 2007

Amount of Each Disbursement this Period

116.11

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

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)  
DR Symantec

Mailing Address 20330 Stevens Creek Blvd.

City Cupertino State CA Zip Code 95014-

Purpose of Disbursement  
computer software

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 70801.E18960  
Date of Disbursement

07 / 19 / 2007

Amount of Each Disbursement this Period

59.99

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

[MEMO ITEM]

MEMO: COMPUTER SOFTWARE

C.

Full Name (Last, First, Middle Initial)  
Ruby Tuesday

Mailing Address 419 Memorial Blvd.

City Murfreesboro State TN Zip Code 37129-

Purpose of Disbursement  
staff meals

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 70801.E18968  
Date of Disbursement

07 / 19 / 2007

Amount of Each Disbursement this Period

29.04

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

[MEMO ITEM]

MEMO: STAFF MEALS

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)  
Congressman Bart Gordon Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ruby Tuesday Mailing Address 419 Memorial Blvd. City Murfreesboro State TN Zip Code 37129- Purpose of Disbursement staff meals 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: 70801.E18969 Date of Disbursement 07 / 19 / 2007
	Amount of Each Disbursement this Period 25.04
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: STAFF MEALS

<b>B.</b> Full Name (Last, First, Middle Initial) Chase Credit Card Services Mailing Address P.O. Box 940414 City Palatine State IL Zip Code 60094- Purpose of Disbursement CREDIT CARD: SEE BELOW 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: 70824.E18980 Date of Disbursement 08 / 01 / 2007
	Amount of Each Disbursement this Period 1068.10
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	CREDIT CARD: SEE BELOW

<b>C.</b> Full Name (Last, First, Middle Initial) Intercontinental Hotel Mailing Address 1401 Pennsylvania Ave., NW City Washington State DC Zip Code 20004- Purpose of Disbursement fundraising planning 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: 70824.E19004 Date of Disbursement 07 / 14 / 2007
	Amount of Each Disbursement this Period 183.94
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: FUNDRAISING PLANNING MEETING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1068.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
Frugal MacDoogal

Mailing Address 701 Division St.

City Nashville State TN Zip Code 37203-

Purpose of Disbursement  
reception expense

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70824.E19003  
Date of Disbursement

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

Amount of Each Disbursement this Period

107.53
--------

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

[MEMO ITEM]

MEMO: RECEPTION EXPENSE

B.

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

Mailing Address 1720 Old Fort Parkway

City Murfreesboro State TN Zip Code 37130-

Purpose of Disbursement  
office supplies

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70824.E19002  
Date of Disbursement

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

Amount of Each Disbursement this Period

74.89
-------

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

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

C.

Full Name (Last, First, Middle Initial)  
T-Mobile Phone Service

Mailing Address 1810 Old Fort Parkway Suite D

City Murfreesboro State TN Zip Code 37130-

Purpose of Disbursement  
mobile phone service

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 70824.E18985  
Date of Disbursement

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

Amount of Each Disbursement this Period

129.56
--------

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

[MEMO ITEM]

MEMO: MOBILE PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional) ..... ▶

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Buffalo Wild Wings	Transaction ID: 70824.E18983 Date of Disbursement 08 / 01 / 2007
	Mailing Address 207 B Mall Circle Dr.	Amount of Each Disbursement this Period 90.53
	City Murfreesboro State TN Zip Code 37129-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement staff meals	<b>[MEMO ITEM]</b> MEMO: STAFF MEALS
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MacGregors Wine & Liquor	Transaction ID: 70824.E19000 Date of Disbursement 08 / 01 / 2007
	Mailing Address Memorial Blvd.	Amount of Each Disbursement this Period 142.13
	City Murfreesboro State TN Zip Code 37129-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement reception expense	<b>[MEMO ITEM]</b> MEMO: RECEPTION EXPENSE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chase Credit Card Services	Transaction ID: 70824.E19008 Date of Disbursement 08 / 20 / 2007
	Mailing Address P.O. Box 940414	Amount of Each Disbursement this Period 1451.97
	City Palatine State IL Zip Code 60094-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CREDIT CARD: SEE BELOW	CREDIT CARD: SEE BELOW
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1451.97

**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)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Southwest Air	Transaction ID: 70824.E19022 Date of Disbursement 08 / 20 / 2007
	Mailing Address P.O. Box 36647-1CR	Amount of Each Disbursement this Period 417.30
	City Dallas State TX Zip Code 75235-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel expense Candidate Name	<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Southwest Air	Transaction ID: 70824.E19023 Date of Disbursement 08 / 20 / 2007
	Mailing Address P.O. Box 36647-1CR	Amount of Each Disbursement this Period 417.30
	City Dallas State TX Zip Code 75235-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel expense Candidate Name	<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 70824.E19024 Date of Disbursement 08 / 20 / 2007
	Mailing Address 25 North Goodwin Avenue	Amount of Each Disbursement this Period 244.80
	City Kingston State PA Zip Code 18704-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel expense Candidate Name	<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE
	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)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 70824.E19025 Date of Disbursement 08 / 20 / 2007
	Mailing Address 25 North Goodwin Avenue	Amount of Each Disbursement this Period 100.00
	City Kingston State PA Zip Code 18704-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel expense	<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jimmy Kellys	Transaction ID: 70824.E19021 Date of Disbursement 08 / 20 / 2007
	Mailing Address 217 Louise Ave.	Amount of Each Disbursement this Period 18.75
	City Nashville State TN Zip Code 37203-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement staff meals	<b>[MEMO ITEM]</b> MEMO: STAFF MEALS
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Northside Liquors	Transaction ID: 70824.E19030 Date of Disbursement 08 / 20 / 2007
	Mailing Address 220 W. Northfield Blvd.	Amount of Each Disbursement this Period 44.99
	City Murfreesboro State TN Zip Code 37129-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement reception expense	<b>[MEMO ITEM]</b> MEMO: RECEPTION EXPENSE
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Milanos Restaurant	Transaction ID: 70824.E19032 Date of Disbursement 08 / 20 / 2007
	Mailing Address 179 Mall Circle Rd.	Amount of Each Disbursement this Period 23.12
	City Murfreesboro State TN Zip Code 37129-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement staff meals	<b>[MEMO ITEM]</b> MEMO: STAFF MEALS
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chase Credit Card Services	Transaction ID: 70921.E19037 Date of Disbursement 08 / 27 / 2007
	Mailing Address P.O. Box 940414	Amount of Each Disbursement this Period 1395.94
	City Palatine State IL Zip Code 60094-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CREDIT CARD: SEE BELOW	CREDIT CARD: SEE BELOW
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bonfish Grill	Transaction ID: 70921.E19049 Date of Disbursement 08 / 16 / 2007
	Mailing Address 505 N. Thompson Lane	Amount of Each Disbursement this Period 106.98
	City Murfreesboro State TN Zip Code 37129-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement staff meals	<b>[MEMO ITEM]</b> MEMO: STAFF MEALS
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1395.94
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Intercontinental Hotel <hr/> Mailing Address 1401 Pennsylvania Ave., NW <hr/> City Washington State DC Zip Code 20004- <hr/> Purpose of Disbursement fundraising planning meeting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70921.E19044 Date of Disbursement 08 / 04 / 2007 <hr/> Amount of Each Disbursement this Period 69.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: FUNDRAISING PLANNING MEETING
B.	Full Name (Last, First, Middle Initial) T-Mobile Phone Service <hr/> Mailing Address 1810 Old Fort Parkway Suite D <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement mobile phone service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70921.E19047 Date of Disbursement 08 / 14 / 2007 <hr/> Amount of Each Disbursement this Period 143.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: MOBILE PHONE SERVICE
C.	Full Name (Last, First, Middle Initial) Five Senses Restaurant <hr/> Mailing Address 1602 W. Northfield Blvd. <hr/> City Murfreesboro State TN Zip Code 37129- <hr/> Purpose of Disbursement staff meals Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70921.E19048 Date of Disbursement 08 / 15 / 2007 <hr/> Amount of Each Disbursement this Period 177.39 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: STAFF MEALS

**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)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
Kinkeads Restaurant

Mailing Address 2000 Pennsylvania Ave., NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement fundraising planning meeting  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70921.E19042  
Date of Disbursement

08 / 09 / 2007

Amount of Each Disbursement this Period

103.70

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

[MEMO ITEM]

MEMO: FUNDRAISING PLANNING MEETING

B.

Full Name (Last, First, Middle Initial)  
Kinkeads Restaurant

Mailing Address 2000 Pennsylvania Ave., NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement fundraising planning meeting  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70921.E19041  
Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

185.10

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

[MEMO ITEM]

MEMO: FUNDRAISING PLANNING MEETING

C.

Full Name (Last, First, Middle Initial)  
Kinkeads Restaurant

Mailing Address 2000 Pennsylvania Ave., NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement reception expense  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70921.E19040  
Date of Disbursement

07 / 21 / 2005

Amount of Each Disbursement this Period

133.30

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

[MEMO ITEM]

MEMO: RECEPTION EXPENSE

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)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
National Democratic Club

Transaction ID: 70801.E18932  
Date of Disbursement

Mailing Address 30 Ivy St. SE

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	7	

City Washington State DC Zip Code 20003-

Amount of Each Disbursement this Period

275.00
--------

Purpose of Disbursement membership dues

--

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

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

MEMBERSHIP DUES

State: District:

B.

Full Name (Last, First, Middle Initial)  
National Democratic Club

Transaction ID: 70801.E18931  
Date of Disbursement

Mailing Address 30 Ivy St. SE

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	7	

City Washington State DC Zip Code 20003-

Amount of Each Disbursement this Period

280.80
--------

Purpose of Disbursement reception expense

--

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

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

RECEPTION EXPENSE

State: District:

C.

Full Name (Last, First, Middle Initial)  
Manuel Diaz

Transaction ID: 71011.E19123  
Date of Disbursement

Mailing Address 3909 Spruell Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	7	

City Kensington State MD Zip Code 20895-

Amount of Each Disbursement this Period

125.00
--------

Purpose of Disbursement reception expense

--

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

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

RECEPTION EXPENSE

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

680.80
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TOTAL This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Murfreesboro Electric Department	Transaction ID: 70627.E18899 Date of Disbursement 07 / 01 / 2007
	Mailing Address 205 N. Walnut St. P.O. Box 9	Amount of Each Disbursement this Period 84.31
	City Murfreesboro State TN Zip Code 37133-0009	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement utilities Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		UTILITIES

B.	Full Name (Last, First, Middle Initial) Murfreesboro Electric Department	Transaction ID: 70801.E18958 Date of Disbursement 07 / 16 / 2007
	Mailing Address 205 N. Walnut St. P.O. Box 9	Amount of Each Disbursement this Period 96.04
	City Murfreesboro State TN Zip Code 37133-0009	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement utilities Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		UTILITIES

C.	Full Name (Last, First, Middle Initial) Murfreesboro Electric Department	Transaction ID: 70824.E19016 Date of Disbursement 08 / 20 / 2007
	Mailing Address 205 N. Walnut St. P.O. Box 9	Amount of Each Disbursement this Period 121.00
	City Murfreesboro State TN Zip Code 37133-0009	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement utilities Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		UTILITIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>301.35</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
Tenn. Dept of Employment Security

Mailing Address 313 Cordell Hull Bldg.

City Nashville State TN Zip Code 37219-

Purpose of Disbursement  
employment insurance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 70824.E18989

Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

331.66

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

EMPLOYMENT INSURANCE

B.

Full Name (Last, First, Middle Initial)  
Atmos Energy

Mailing Address P.O. Box 1313

City Murfreesboro State TN Zip Code 37133-

Purpose of Disbursement  
utilities

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 70627.E18895

Date of Disbursement

07 / 01 / 2007

Amount of Each Disbursement this Period

26.96

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

UTILITIES

C.

Full Name (Last, First, Middle Initial)  
Atmos Energy

Mailing Address P.O. Box 1313

City Murfreesboro State TN Zip Code 37133-

Purpose of Disbursement  
utilities

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 70801.E18977

Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

26.96

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

UTILITIES

SUBTOTAL of Disbursements This Page (optional) ▶

385.58

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)  
Congressman Bart Gordon Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Atmos Energy Mailing Address P.O. Box 1313 City Murfreesboro State TN Zip Code 37133- Purpose of Disbursement utilities 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: 70921.E19057 Date of Disbursement 09 / 05 / 2007
	Amount of Each Disbursement this Period 26.96
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	UTILITIES
	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) FedEx Mailing Address 2298 Old Fort Parkway City Murfreesboro State TN Zip Code 37130- 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: 70921.E19059 Date of Disbursement 09 / 06 / 2007
	Amount of Each Disbursement this Period 44.08
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	SHIPPING
	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Bud Cramer For Congress Mailing Address 5th District, Alabama P.O. Box 2621 City Huntsville State AL Zip Code 35804- Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71010.C119709IK Date of Disbursement 09 / 12 / 2007
	Amount of Each Disbursement this Period 963.88
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	IN KIND:
	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1034.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Air Gas Mailing Address 411 West College St. City Murfreesboro State TN Zip Code 37129- Purpose of Disbursement helium 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: 70801.E18933 Date of Disbursement 07 / 15 / 2007
	Amount of Each Disbursement this Period 503.24
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	HELIUM
	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Air Gas Mailing Address 411 West College St. City Murfreesboro State TN Zip Code 37129- Purpose of Disbursement helium 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: 70801.E18959 Date of Disbursement 07 / 16 / 2007
	Amount of Each Disbursement this Period 108.76
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	HELIUM
	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Air Gas Mailing Address 411 West College St. City Murfreesboro State TN Zip Code 37129- Purpose of Disbursement helium 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: 70824.E19005 Date of Disbursement 08 / 06 / 2007
	Amount of Each Disbursement this Period 8.53
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	HELIUM
	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	620.53
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Ashley Hultman	Transaction ID: 70801.E18937 Date of Disbursement 07 / 15 / 2007
	Mailing Address 900 East Main Street Apt. 4	Amount of Each Disbursement this Period 726.76
	City Murfreesboro State TN Zip Code 37130-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement wages	Category/Type
	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) ▼
		WAGES

B.	Full Name (Last, First, Middle Initial) Ashley Hultman	Transaction ID: 70801.E18938 Date of Disbursement 07 / 16 / 2007
	Mailing Address 900 East Main Street Apt. 4	Amount of Each Disbursement this Period 57.85
	City Murfreesboro State TN Zip Code 37130-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement mileage reimbursement	Category/Type
	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) ▼
		MILEAGE REIMBURSEMENT

C.	Full Name (Last, First, Middle Initial) Ashley Hultman	Transaction ID: 70824.E18993 Date of Disbursement 08 / 01 / 2007
	Mailing Address 900 East Main Street Apt. 4	Amount of Each Disbursement this Period 69.87
	City Murfreesboro State TN Zip Code 37130-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement mileage reimbursement	Category/Type
	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) ▼
		MILEAGE REIMBURSEMENT

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

854.48

**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)  
Congressman Bart Gordon Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ashley Hultman <hr/> Mailing Address 900 East Main Street Apt. 4 <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70824.E18992 Date of Disbursement 08 / 01 / 2007
	Amount of Each Disbursement this Period 627.01
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	WAGES
	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) Ashley Hultman <hr/> Mailing Address 900 East Main Street Apt. 4 <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70824.E19012 Date of Disbursement 08 / 16 / 2007
	Amount of Each Disbursement this Period 558.89
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	WAGES
	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Ashley Hultman <hr/> Mailing Address 900 East Main Street Apt. 4 <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70921.E19060 Date of Disbursement 08 / 30 / 2007
	Amount of Each Disbursement this Period 629.32
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	WAGES
	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1815.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ashley Hultman <hr/> Mailing Address 900 East Main Street Apt. 4 <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement wages Candidate Name <hr/> 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: 71011.E19109 Date of Disbursement 09 / 14 / 2007 <hr/> Amount of Each Disbursement this Period 283.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>WAGES</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Aristotle Industries <hr/> Mailing Address 205 Pennsylvania Ave. SE <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement computer support Candidate Name <hr/> 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: 70801.E18934 Date of Disbursement 07 / 16 / 2007 <hr/> Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>COMPUTER SUPPORT</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Daily News Journal <hr/> Mailing Address 224 North Walnut Street <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement subscription Candidate Name <hr/> 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: 70801.E18957 Date of Disbursement 07 / 16 / 2007 <hr/> Amount of Each Disbursement this Period 8.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SUBSCRIPTION</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1791.90</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Daily News Journal</p> <p>Mailing Address 224 North Walnut Street</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 70824.E19017 <b>Date of Disbursement</b> 08 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 7.69</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SUBSCRIPTION</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Daily News Journal</p> <p>Mailing Address 224 North Walnut Street</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71011.E19114 <b>Date of Disbursement</b> 09 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 8.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SUBSCRIPTION</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Thom Mason</p> <p>Mailing Address 171 Whippoorwill Drive</p> <p>City Oak Ridge State TN Zip Code 37831-</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71010.C119708IK <b>Date of Disbursement</b> 09 / 14 / 2007</p> <p>Amount of Each Disbursement this Period 1141.48</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>IN KIND:</b></p>

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

1157.17

**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)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
Laser One

Mailing Address 800 4th Ave., South

City Nashville State TN Zip Code 37210-

Purpose of Disbursement office equipment  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70824.E18999  
Date of Disbursement

08 / 01 / 2007

Amount of Each Disbursement this Period

1341.76

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

OFFICE EQUIPMENT

B.

Full Name (Last, First, Middle Initial)  
Joe Patterson

Mailing Address 152 Brawley Circle

City Readyville State TN Zip Code 37149-

Purpose of Disbursement mileage reimbursement  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70801.E18956  
Date of Disbursement

07 / 16 / 2007

Amount of Each Disbursement this Period

133.06

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

MILEAGE REIMBURSEMENT

C.

Full Name (Last, First, Middle Initial)  
Joe Patterson

Mailing Address 152 Brawley Circle

City Readyville State TN Zip Code 37149-

Purpose of Disbursement reimbursement for office supplies  
Candidate Name

Category/Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 70801.E18955  
Date of Disbursement

07 / 16 / 2007

Amount of Each Disbursement this Period

133.70

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

REIMBURSEMENT FOR OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) .....

1608.52

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)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Joe Patterson	Transaction ID: 71011.E19115 Date of Disbursement 09 / 24 / 2007
	Mailing Address 152 Brawley Circle	Amount of Each Disbursement this Period 131.33
	City Readyville State TN Zip Code 37149-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement mileage reimbursement	Category/Type
	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) ▼
		MILEAGE REIMBURSEMENT

B.	Full Name (Last, First, Middle Initial) AT & T	Transaction ID: 70627.E18896 Date of Disbursement 07 / 01 / 2007
	Mailing Address P.O. Box 55000	Amount of Each Disbursement this Period 582.01
	City Detroit State MI Zip Code 48255-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone service	Category/Type
	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) ▼
		TELEPHONE SERVICE

C.	Full Name (Last, First, Middle Initial) AT & T	Transaction ID: 70824.E18987 Date of Disbursement 08 / 01 / 2007
	Mailing Address P.O. Box 55000	Amount of Each Disbursement this Period 585.56
	City Detroit State MI Zip Code 48255-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone service	Category/Type
	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) ▼
		TELEPHONE SERVICE

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

1298.90

**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)  
Congressman Bart Gordon Committee

<b>A.</b> Full Name (Last, First, Middle Initial) AT & T Mailing Address P.O. Box 55000 City Detroit State MI Zip Code 48255- Purpose of Disbursement telephone service 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: 70921.E19063 Date of Disbursement 09 / 06 / 2007
	Amount of Each Disbursement this Period 582.77
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	TELEPHONE SERVICE

<b>B.</b> Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 825 S. Church Street City Murfreesboro State TN Zip Code 37130- Purpose of Disbursement postage 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: 70921.E19056 Date of Disbursement 09 / 05 / 2007
	Amount of Each Disbursement this Period 1025.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	POSTAGE

<b>C.</b> Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 825 S. Church Street City Murfreesboro State TN Zip Code 37130- Purpose of Disbursement postage 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: 71011.E19116 Date of Disbursement 09 / 25 / 2007
	Amount of Each Disbursement this Period 535.27
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	POSTAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2143.04
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<b>A.</b> Full Name (Last, First, Middle Initial) BBC Productions <hr/> Mailing Address P.O. Box 5383 <hr/> City Herndon State VA Zip Code 20170- <hr/> Purpose of Disbursement reception expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70801.E18930 Date of Disbursement MM / DD / YYYY 07 / 16 / 2007
	Amount of Each Disbursement this Period 165.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>RECEPTION EXPENSE</b>

<b>B.</b> Full Name (Last, First, Middle Initial) BBC Productions <hr/> Mailing Address P.O. Box 5383 <hr/> City Herndon State VA Zip Code 20170- <hr/> Purpose of Disbursement reception expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71012.E19126 Date of Disbursement MM / DD / YYYY 09 / 17 / 2007
	Amount of Each Disbursement this Period 165.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>RECEPTION EXPENSE</b>

<b>C.</b> Full Name (Last, First, Middle Initial) Democratic Properties, Inc. <hr/> Mailing Address DNC 430 S. Capitol St., SE <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement room rental Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70627.E18893 Date of Disbursement MM / DD / YYYY 07 / 01 / 2007
	Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>ROOM RENTAL</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>480.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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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)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Marco Rovas <hr/> Mailing Address 3909 Spruell Drive <hr/> City Kensington State MD Zip Code 20895- <hr/> Purpose of Disbursement reception expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 71012.E19125 <b>Date of Disbursement</b> <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="125.00"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>RECEPTION EXPENSE</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Internal Revenue Service <hr/> Mailing Address Department of the Treasury <hr/> City Memphis State TN Zip Code 37501- <hr/> Purpose of Disbursement tax payment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 70824.E18988 <b>Date of Disbursement</b> <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="4152.29"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TAX PAYMENT</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Mike Terry <hr/> Mailing Address 1485 Bradberry Drive <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 70627.E18892 <b>Date of Disbursement</b> <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/> <hr/> Amount of Each Disbursement this Period <input type="text" value="2525.28"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>WAGES</b>

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

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

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

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mike Terry <hr/> Mailing Address 1485 Bradberry Drive <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement mileage reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70801.E18929 Date of Disbursement 07 / 02 / 2007 <hr/> Amount of Each Disbursement this Period 217.77 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  MILEAGE REIMBURSEMENT
<b>B.</b>	Full Name (Last, First, Middle Initial) Mike Terry <hr/> Mailing Address 1485 Bradberry Drive <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement mileage reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70801.E18935 Date of Disbursement 07 / 16 / 2007 <hr/> Amount of Each Disbursement this Period 248.32 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  MILEAGE REIMBURSEMENT
<b>C.</b>	Full Name (Last, First, Middle Initial) Mike Terry <hr/> Mailing Address 1485 Bradberry Drive <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70824.E18990 Date of Disbursement 08 / 01 / 2007 <hr/> Amount of Each Disbursement this Period 2525.28 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  WAGES

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

2991.37

**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)  
Congressman Bart Gordon Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mike Terry <hr/> Mailing Address 1485 Bradberry Drive <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement mileage reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70824.E19014 Date of Disbursement 08 / 20 / 2007
	Amount of Each Disbursement this Period 304.44
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	MILEAGE REIMBURSEMENT

<b>B.</b> Full Name (Last, First, Middle Initial) Mike Terry <hr/> Mailing Address 1485 Bradberry Drive <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70921.E19062 Date of Disbursement 08 / 30 / 2007
	Amount of Each Disbursement this Period 2525.28
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	WAGES

<b>C.</b> Full Name (Last, First, Middle Initial) Mike Terry <hr/> Mailing Address 1485 Bradberry Drive <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement mileage reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 71011.E19110 Date of Disbursement 09 / 20 / 2007
	Amount of Each Disbursement this Period 203.38
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	MILEAGE REIMBURSEMENT

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3033.10
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 33050</p> <p>City Saint Petersburg State FL Zip Code 33733-</p> <p>Purpose of Disbursement mobile phone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 70710.E18907</p> <p>Date of Disbursement 07 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 128.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>MOBILE PHONE SERVICE</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 33050</p> <p>City Saint Petersburg State FL Zip Code 33733-</p> <p>Purpose of Disbursement mobile phone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71011.E19107</p> <p>Date of Disbursement 07 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 71.04</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>MOBILE PHONE SERVICE</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 33050</p> <p>City Saint Petersburg State FL Zip Code 33733-</p> <p>Purpose of Disbursement mobile phone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 70824.E18998</p> <p>Date of Disbursement 08 / 01 / 2007</p> <p>Amount of Each Disbursement this Period 131.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>MOBILE PHONE SERVICE</b></p>

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

**331.44**

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

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 33050 City Saint Petersburg State FL Zip Code 33733- Purpose of Disbursement mobile phone service 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: 70921.E19097 Date of Disbursement 08 / 04 / 2007 Amount of Each Disbursement this Period 142.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MOBILE PHONE SERVICE
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 33050 City Saint Petersburg State FL Zip Code 33733- Purpose of Disbursement mobile phone service 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: 70921.E19053 Date of Disbursement 08 / 28 / 2007 Amount of Each Disbursement this Period 128.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MOBILE PHONE SERVICE
<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph Womack Mailing Address 113 Casper Ct. City Murfreesboro State TN Zip Code 37128- Purpose of Disbursement mileage reimbursement 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: 70801.E18951 Date of Disbursement 07 / 16 / 2007 Amount of Each Disbursement this Period 57.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MILEAGE REIMBURSEMENT

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

328.79

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



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

Use separate schedule(s)  
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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)  
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Joseph Womack	Transaction ID: 70801.E18950 Date of Disbursement 07 / 16 / 2007
	Mailing Address 113 Casper Ct.	Amount of Each Disbursement this Period 103.50
	City Murfreesboro State TN Zip Code 37128-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement wages	Category/Type
	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) ▼
		WAGES

B.	Full Name (Last, First, Middle Initial) Queenie Woods	Transaction ID: 70801.E18976 Date of Disbursement 07 / 23 / 2007
	Mailing Address 441 Evergreen Street	Amount of Each Disbursement this Period 75.00
	City Murfreesboro State TN Zip Code 37130-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement cleaning service	Category/Type
	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) ▼
		CLEANING SERVICE

C.	Full Name (Last, First, Middle Initial) Queenie Woods	Transaction ID: 71011.E19111 Date of Disbursement 09 / 21 / 2007
	Mailing Address 441 Evergreen Street	Amount of Each Disbursement this Period 75.00
	City Murfreesboro State TN Zip Code 37130-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement cleaning service	Category/Type
	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) ▼
		CLEANING SERVICE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	253.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	46922.48

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

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Comm.</p> <p>Mailing Address 430 South Capitol Street</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement DONATION OF EXCESS CAMPAIGN FUNDS</p> <p>Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 70921.E19055 <b>Date of Disbursement</b> 09 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Comm.</p> <p>Mailing Address 430 South Capitol Street</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement DONATION OF EXCESS CAMPAIGN FUNDS</p> <p>Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 71011.E19121 <b>Date of Disbursement</b> 09 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) TN House-Senate Joint Democratic Caucus</p> <p>Mailing Address 223 8th Avenue North</p> <p>City Nashville State TN Zip Code 37203-3513</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 70801.E18979 <b>Date of Disbursement</b> 07 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>25000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
Steve Cohen For Congress

Transaction ID: 71012.E19127  
Date of Disbursement

Mailing Address Tennessee House District 9  
707 Adams Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	7

City Memphis State TN Zip Code 38105-

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
DONATION

--

Candidate Name

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

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Berke For State Senate

Transaction ID: 70824.E19010  
Date of Disbursement

Mailing Address P.O. Box 4747

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

City Chattanooga State TN Zip Code 37405-

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
DONATION

--

Candidate Name

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

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

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

27000.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)  
Steve Champlin

Mailing Address 2100 Pennsylvania Ave., NW  
Suite 500

City Washington State DC Zip Code 20037-

Purpose of Disbursement  
Refund of Contribution

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 71012.E19129

Date of Disbursement

09 / 30 / 2007

Amount of Each Disbursement this Period

5000.00

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

SUBTOTAL of Disbursements This Page (optional) .....

5000.00

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

5000.00

Image# 28932181643

Form/Schedule: **F3A**

Transaction ID:

This amendment redesignates a \$5,000 contribution from Engineers Political Education Committee PAC on September 5, 2007 from its current designation in the primary election to the correct designation in the general election.

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