

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 01 01 2010 through 03 31 2010

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 06 21 2010

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Congressman Bart Gordon Committee

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	0.00	529668.70
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	528168.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	86641.03	365307.85
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	110.06
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	86641.03	365197.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1103554.56	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Congressman Bart Gordon Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	0.00	92568.70
(i) Itemized (use Schedule A).....	0.00	2790.00
(ii) Unitemized.....	0.00	95358.70
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	434310.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	529668.70
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	1000.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	1000.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	110.06
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	5412.58	43856.14
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	5412.58	574634.90

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	86641.03	365307.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1500.00
21. OTHER DISBURSEMENTS.....	54850.00	165030.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	141491.03	531837.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1239633.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	5412.58
25. SUBTOTAL (add Line 23 and Line 24).....	1245045.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	141491.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1103554.56

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 74
(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 National Bank
Mailing Address 1386 North Main Street
City Crossville State TN Zip Code 38555-4082
FEC ID number of contributing federal political committee. **C**
Name of Employer Interest on Occupation Certificate of Deposit
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 6277.34
Date of Receipt 01 / 25 / 2010
Transaction ID: 00126.C123642
Amount of Each Receipt this Period 157.91
Other Receipt

B. Full Name (Last, First, Middle Initial)
First National Bank
Mailing Address 1386 North Main Street
City Crossville State TN Zip Code 38555-4082
FEC ID number of contributing federal political committee. **C**
Name of Employer Interest on Occupation Certificate of Deposit
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 6435.25
Date of Receipt 02 / 26 / 2010
Transaction ID: 00408.C123653
Amount of Each Receipt this Period 157.91
Other Receipt

C. Full Name (Last, First, Middle Initial)
First National Bank
Mailing Address 1386 North Main Street
City Crossville State TN Zip Code 38555-4082
FEC ID number of contributing federal political committee. **C**
Name of Employer Interest on Occupation Certificate of Deposit
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 6577.87
Date of Receipt 03 / 26 / 2010
Transaction ID: 00412.C123671
Amount of Each Receipt this Period 142.62
Other Receipt

SUBTOTAL of Receipts This Page (optional) ► 458.44
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 / 74

(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 checked="" 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)
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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2998.68

Date of Receipt M M / D D / Y Y Y Y
01 / 25 / 2010

Transaction ID: 00126.C123639

Amount of Each Receipt this Period 59.45

Other Receipt

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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3058.13

Date of Receipt M M / D D / Y Y Y Y
02 / 26 / 2010

Transaction ID: 00408.C123649

Amount of Each Receipt this Period 59.45

Other Receipt

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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3111.83

Date of Receipt M M / D D / Y Y Y Y
03 / 26 / 2010

Transaction ID: 00412.C123672

Amount of Each Receipt this Period 53.70

Other Receipt

SUBTOTAL of Receipts This Page (optional) 172.60

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 / 74
(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 Murfreesboro State TN Zip Code 37130-
FEC ID number of contributing federal political committee. **C**
Name of Employer Interest on Occupation Certificate of Deposit
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4231.76
Date of Receipt 01 / 11 / 2010
Transaction ID: 00111.C123632
Amount of Each Receipt this Period 169.86
Other Receipt

B. Full Name (Last, First, Middle Initial)
Pinnacle Bank
Mailing Address 114 West College Street
City Murfreesboro State TN Zip Code 37130-
FEC ID number of contributing federal political committee. **C**
Name of Employer Interest on Occupation Certificate of Deposit
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4410.12
Date of Receipt 01 / 25 / 2010
Transaction ID: 00126.C123640
Amount of Each Receipt this Period 178.36
Other Receipt

C. Full Name (Last, First, Middle Initial)
Pinnacle Bank
Mailing Address 114 West College Street
City Murfreesboro State TN Zip Code 37130-
FEC ID number of contributing federal political committee. **C**
Name of Employer Interest on Occupation Certificate of Deposit
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4579.98
Date of Receipt 02 / 12 / 2010
Transaction ID: 00408.C123645
Amount of Each Receipt this Period 169.86
Other Receipt

SUBTOTAL of Receipts This Page (optional) ► 518.08
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 / 74
(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

<p>A. Full Name (Last, First, Middle Initial) Pinnacle Bank</p> <p>Mailing Address 114 West College Street</p> <p>City State Zip Code Murfreesboro TN 37130-</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Interest on Occupation Certificate of Deposit</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 4758.34</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 1 0</p> <p>Transaction ID: 00408.C123652</p> <p>Amount of Each Receipt this Period 178.36</p> <p>Other Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Pinnacle Bank</p> <p>Mailing Address 114 West College Street</p> <p>City State Zip Code Murfreesboro TN 37130-</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Interest on Occupation Certificate of Deposit</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 4911.76</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 1 0</p> <p>Transaction ID: 00408.C123658</p> <p>Amount of Each Receipt this Period 153.42</p> <p>Other Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) Pinnacle Bank</p> <p>Mailing Address 114 West College Street</p> <p>City State Zip Code Murfreesboro TN 37130-</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Interest on Occupation Certificate of Deposit</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5072.86</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 0</p> <p>Transaction ID: 00408.C123665</p> <p>Amount of Each Receipt this Period 161.10</p> <p>Other Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	492.88
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 9 / 74
(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 100 E Vine Street

City State Zip Code
Murfreesboro TN 37130-

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2107.35

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

Transaction ID: 00408.C123661

Amount of Each Receipt this Period
32.65

Other Receipt

B. Full Name (Last, First, Middle Initial)
Regions Bank
Mailing Address 100 E Vine Street

City State Zip Code
Murfreesboro TN 37130-

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2140.16

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

Transaction ID: 00408.C123662

Amount of Each Receipt this Period
32.81

Other Receipt

C. Full Name (Last, First, Middle Initial)
Regions Bank
Mailing Address 100 E Vine Street

City State Zip Code
Murfreesboro TN 37130-

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.49

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

Transaction ID: 00408.C123668

Amount of Each Receipt this Period
60.33

Other Receipt

SUBTOTAL of Receipts This Page (optional) ► **125.79**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 74
(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: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3391.99
Date of Receipt 01 / 25 / 2010
Transaction ID: 00126.C123637
Amount of Each Receipt this Period 181.07
Other Receipt

B. 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: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3567.22
Date of Receipt 02 / 12 / 2010
Transaction ID: 00408.C123646
Amount of Each Receipt this Period 175.23
Other Receipt

C. 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: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3748.29
Date of Receipt 02 / 26 / 2010
Transaction ID: 00408.C123651
Amount of Each Receipt this Period 181.07
Other Receipt

SUBTOTAL of Receipts This Page (optional) ► 537.37
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 / 74
(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: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3911.84
Date of Receipt 03 / 15 / 2010
Transaction ID: 00408.C123666
Amount of Each Receipt this Period 163.55
Other Receipt

B. Full Name (Last, First, Middle Initial)
Community First Bank & Trust
Mailing Address 1950 Old Fort Pkwy
City Murfreesboro State TN Zip Code 37129-
FEC ID number of contributing federal political committee. **C**
Name of Employer Interest on Occupation Certificate of Deposit
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4065.06
Date of Receipt 01 / 25 / 2010
Transaction ID: 00126.C123641
Amount of Each Receipt this Period 212.33
Other Receipt

C. Full Name (Last, First, Middle Initial)
Community First Bank & Trust
Mailing Address 1950 Old Fort Pkwy
City Murfreesboro State TN Zip Code 37129-
FEC ID number of contributing federal political committee. **C**
Name of Employer Interest on Occupation Certificate of Deposit
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4277.39
Date of Receipt 02 / 26 / 2010
Transaction ID: 00408.C123650
Amount of Each Receipt this Period 212.33
Other Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 588.21
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 74
(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)
Community First Bank & Trust

Mailing Address 1950 Old Fort Pkwy

City State Zip Code
Murfreesboro TN 37129-

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

Name of Employer Interest on Occupation
Certificate of Deposit

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4469.17

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 15 / 2010

Transaction ID: 00408.C123664

Amount of Each Receipt this Period
191.78

Other Receipt

B. 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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3895.55

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2010

Transaction ID: 00126.C123643

Amount of Each Receipt this Period
106.16

Other Receipt

C. 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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4065.84

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 12 / 2010

Transaction ID: 00408.C123644

Amount of Each Receipt this Period
170.29

Other Receipt

SUBTOTAL of Receipts This Page (optional) ► **468.23**

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 / 74
(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)
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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4172.01

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

Transaction ID: 00408.C123655

Amount of Each Receipt this Period
106.17

Other Receipt

B. 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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4336.80

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

Transaction ID: 00408.C123659

Amount of Each Receipt this Period
164.79

Other Receipt

C. Full Name (Last, First, Middle Initial)
MidSouth Bank Money Mkt Acct.

Mailing Address One East College St.
P.O. Box 7100

City State Zip Code
Murfreesboro TN 37133-7100

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3104.73

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

Transaction ID: 00408.C123647

Amount of Each Receipt this Period
230.74

Other Receipt

SUBTOTAL of Receipts This Page (optional) ► **501.70**

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 14 / 74
(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)
MidSouth Bank Money Mkt Acct.
Mailing Address One East College St.
P.O. Box 7100
City Murfreesboro State TN Zip Code 37133-7100
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
3327.73
Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 1 0
Transaction ID: 00408.C123660
Amount of Each Receipt this Period
223.00
Other Receipt

B. Full Name (Last, First, Middle Initial)
MidSouth Bank Money Mkt Acct.
Mailing Address One East College St.
P.O. Box 7100
City Murfreesboro State TN Zip Code 37133-7100
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
3588.87
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 1 0
Transaction ID: 00408.C123669
Amount of Each Receipt this Period
261.14
Other Receipt

C. Full Name (Last, First, Middle Initial)
Citizens Bank Of Smith County
Mailing Address 407 Main Street
City Carthage State TN Zip Code 37030-
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
1369.84
Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 1 0
Transaction ID: 00115.C123635
Amount of Each Receipt this Period
106.16
Other Receipt

SUBTOTAL of Receipts This Page (optional) ► **590.30**
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 / 74
(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)
Citizens Bank Of Trousdale County
Mailing Address 100 McMurry Blvd.

City State Zip Code
Hartsville TN 37074-

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4274.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	5	/	2	0	1	0

Transaction ID: 00126.C123638
 Amount of Each Receipt this Period
334.63
 Other Receipt

B. Full Name (Last, First, Middle Initial)
Citizens Bank Of Trousdale County
Mailing Address 100 McMurry Blvd.

City State Zip Code
Hartsville TN 37074-

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4609.28

Date of Receipt

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

Transaction ID: 00408.C123656
 Amount of Each Receipt this Period
334.63
 Other Receipt

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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3714.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	1	0

Transaction ID: 00115.C123634
 Amount of Each Receipt this Period
99.79
 Other Receipt

SUBTOTAL of Receipts This Page (optional) ► **769.05**

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 16 / 74
	<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) Bank of Putnam County		Date of Receipt
	Mailing Address P.O. Box 2809		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Cookeville	TN	38501-
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Interest on		Occupation	Transaction ID: 00408.C123654
		Certificate of Deposit	
Receipt For: 2010		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="3814.40"/>	<input type="text" value="99.79"/>
<input type="checkbox"/> Other (specify) ▼			Other Receipt

B.	Full Name (Last, First, Middle Initial) Bank of Putnam County		Date of Receipt
	Mailing Address P.O. Box 2809		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Cookeville	TN	38501-
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Interest on		Occupation	Transaction ID: 00408.C123657
		Certificate of Deposit	
Receipt For: 2010		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="3904.54"/>	<input type="text" value="90.14"/>
<input type="checkbox"/> Other (specify) ▼			Other Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="189.93"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5412.58"/>

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 Alexander Mailing Address 578 Autumn Ct. City La Vergne State TN Zip Code 37086- Purpose of Disbursement wages 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: 00115.E21818 Date of Disbursement 01 / 15 / 2010	Amount of Each Disbursement this Period 322.42 WAGES
B.	Full Name (Last, First, Middle Initial) Amanda Alexander Mailing Address 578 Autumn Ct. City La Vergne State TN Zip Code 37086- Purpose of Disbursement wages 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: 00408.E21845 Date of Disbursement 02 / 01 / 2010	Amount of Each Disbursement this Period 402.42 WAGES
C.	Full Name (Last, First, Middle Initial) Amanda Alexander Mailing Address 578 Autumn Ct. City La Vergne State TN Zip Code 37086- Purpose of Disbursement wages 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: 00408.E21854 Date of Disbursement 02 / 17 / 2010	Amount of Each Disbursement this Period 300.60 WAGES

SUBTOTAL of Disbursements This Page (optional) ▶

1025.44

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

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

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

FOR LINE NUMBER:
(check only one)

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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) Amanda Alexander	Transaction ID: 00408.E21896 Date of Disbursement MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 578 Autumn Ct.	Amount of Each Disbursement this Period 378.17
	City La Vergne State TN Zip Code 37086-	
	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 Alexander	Transaction ID: 00408.E21907 Date of Disbursement MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 578 Autumn Ct.	Amount of Each Disbursement this Period 5.55
	City La Vergne State TN Zip Code 37086-	
	Purpose of Disbursement mileage reimbursement 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) ▼
		MILEAGE REIMBURSEMENT

C.	Full Name (Last, First, Middle Initial) Amanda Alexander	Transaction ID: 00408.E21906 Date of Disbursement MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 578 Autumn Ct.	Amount of Each Disbursement this Period 556.96
	City La Vergne State TN Zip Code 37086-	
	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

SUBTOTAL of Disbursements This Page (optional)	▶	940.68
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 74

<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) E Allan Brandon LLC Mailing Address P.O. Box 10809 City Murfreesboro State TN Zip Code 37129- Purpose of Disbursement Advertising Design 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: 00115.E21815 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 750.00 ADVERTISING DESIGN
B.	Full Name (Last, First, Middle Initial) Comcast Cable TV Mailing Address 2950 Kraft Drive, Ste. 100 City Nashville State TN Zip Code 37204- Purpose of Disbursement cable 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: 00120.E21825 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 1 0	Amount of Each Disbursement this Period 80.32 CABLE SERVICE
C.	Full Name (Last, First, Middle Initial) Comcast Cable TV Mailing Address 2950 Kraft Drive, Ste. 100 City Nashville State TN Zip Code 37204- Purpose of Disbursement cable 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: 00408.E21872 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 1 0	Amount of Each Disbursement this Period 80.32 CABLE SERVICE

SUBTOTAL of Disbursements This Page (optional)	910.64
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)
Comcast Cable TV

Mailing Address 2950 Kraft Drive, Ste. 100

City Nashville State TN Zip Code 37204-

Purpose of Disbursement
cable service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00408.E21926
Date of Disbursement

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

Amount of Each Disbursement this Period

80.32

CABLE SERVICE

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

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00111.E21760
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	0

Amount of Each Disbursement this Period

3764.22

CREDIT CARD: SEE BELOW

C.

Full Name (Last, First, Middle Initial)
Belga Cafe

Mailing Address 514 8th St. SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
reception expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00111.E21765
Date of Disbursement

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

Amount of Each Disbursement this Period

1988.22

[MEMO ITEM]
MEMO: RECEPTION EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

3844.54

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	Transaction ID: 00111.E21774 Date of Disbursement																			
	Mailing Address 620 Ridgely Rd.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	0	9												
	City Murfreesboro State TN Zip Code 37129-	Amount of Each Disbursement this Period																			
	Purpose of Disbursement office supplies	<table border="1"><tr><td>136.35</td></tr></table>	136.35																		
136.35																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			
		[MEMO ITEM] MEMO: OFFICE SUPPLIES																			

B.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: 00111.E21762 Date of Disbursement																			
	Mailing Address 620 Ridgely Rd.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	7		2	0	0	9												
	City Murfreesboro State TN Zip Code 37129-	Amount of Each Disbursement this Period																			
	Purpose of Disbursement office supplies	<table border="1"><tr><td>98.23</td></tr></table>	98.23																		
98.23																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			
		[MEMO ITEM] MEMO: OFFICE SUPPLIES																			

C.	Full Name (Last, First, Middle Initial) Giant Food	Transaction ID: 00111.E21761 Date of Disbursement																			
	Mailing Address 3460 14th St. NE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	7		2	0	0	9												
	City Washington State DC Zip Code 20017-	Amount of Each Disbursement this Period																			
	Purpose of Disbursement reception expense	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			
		[MEMO ITEM] MEMO: RECEPTION EXPENSE																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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) Doubletree Hotel	Transaction ID: 00111.E21769 Date of Disbursement 11 / 20 / 2009
	Mailing Address 801 New Hampshire Ave., NW	Amount of Each Disbursement this Period 474.04
	City Washington State DC Zip Code 20037-2304	
	Purpose of Disbursement 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) ▼
		[MEMO ITEM] MEMO: TRAVEL EXPENSE

B.	Full Name (Last, First, Middle Initial) Congressional Liquors	Transaction ID: 00111.E21768 Date of Disbursement 11 / 19 / 2009
	Mailing Address 404 1st Street, SE	Amount of Each Disbursement this Period 335.67
	City Washington State DC Zip Code 20003-	
	Purpose of Disbursement 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) ▼
		[MEMO ITEM] MEMO: RECEPTION EXPENSE

C.	Full Name (Last, First, Middle Initial) Central Parking	Transaction ID: 00111.E21771 Date of Disbursement 11 / 30 / 2009
	Mailing Address 937 Church St.	Amount of Each Disbursement this Period 6.00
	City Nashville State TN Zip Code 37203-	
	Purpose of Disbursement parking 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) ▼
		[MEMO ITEM] MEMO: PARKING

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) Demos Restaurant <hr/> Mailing Address 1115 NW Broad St. <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00111.E21773 Date of Disbursement 12 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 19.44 <hr/> [MEMO ITEM] MEMO: STAFF MEALS
B.	Full Name (Last, First, Middle Initial) Harris Teeter <hr/> Mailing Address 1350 Potomac Ave. SE <hr/> City Washington State DC Zip Code 20003- <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) ▼	Transaction ID: 00111.E21763 Date of Disbursement 11 / 18 / 2009 <hr/> Amount of Each Disbursement this Period 205.00 <hr/> [MEMO ITEM] MEMO: RECEPTION EXPENSE
C.	Full Name (Last, First, Middle Initial) Chase Credit Card Services <hr/> Mailing Address P.O. Box 940414 <hr/> City Palatine State IL Zip Code 60094- <hr/> Purpose of Disbursement CREDIT CARD: SEE BELOW 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: 00111.E21776 Date of Disbursement 01 / 11 / 2010 <hr/> Amount of Each Disbursement this Period 4741.79 <hr/> CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶

4741.79

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) American Airlines	Transaction ID: 00111.E21794 Date of Disbursement 12 / 10 / 2009
	Mailing Address 2500 Victory Avenue	Amount of Each Disbursement this Period 20.00
	City Dallas State TX Zip Code 75219-	
	Purpose of Disbursement 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) ▼
		[MEMO ITEM] MEMO: TRAVEL EXPENSE

B.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 00111.E21795 Date of Disbursement 12 / 16 / 2009
	Mailing Address 2500 Victory Avenue	Amount of Each Disbursement this Period 483.20
	City Dallas State TX Zip Code 75219-	
	Purpose of Disbursement 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) ▼
		[MEMO ITEM] MEMO: TRAVEL EXPENSE

C.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 00111.E21793 Date of Disbursement 12 / 08 / 2009
	Mailing Address 2500 Victory Avenue	Amount of Each Disbursement this Period 20.00
	City Dallas State TX Zip Code 75219-	
	Purpose of Disbursement 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) ▼
		[MEMO ITEM] MEMO: TRAVEL 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) American Airlines Mailing Address 2500 Victory Avenue City Dallas State TX Zip Code 75219- Purpose of Disbursement travel 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: 00111.E21796 Date of Disbursement 12 / 16 / 2009 Amount of Each Disbursement this Period 483.20 [MEMO ITEM] MEMO: TRAVEL EXPENSE
B.	Full Name (Last, First, Middle Initial) Priceline.Com Mailing Address www.priceline.com City New Haven State CT Zip Code 06503- Purpose of Disbursement travel 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: 00111.E21797 Date of Disbursement 12 / 09 / 2009 Amount of Each Disbursement this Period 373.42 [MEMO ITEM] MEMO: TRAVEL EXPENSE
C.	Full Name (Last, First, Middle Initial) Kroger Grocery Store Mailing Address 1776 East Northfield Boulevard City Murfreesboro State TN Zip Code 37130- Purpose of Disbursement 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) ▼	Transaction ID: 00111.E21779 Date of Disbursement 11 / 24 / 2009 Amount of Each Disbursement this Period 8.08 [MEMO ITEM] MEMO: OFFICE SUPPLIES

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

<p>A. Full Name (Last, First, Middle Initial) Kroger Grocery Store</p> <p>Mailing Address 1776 East Northfield Boulevard</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement office supplies</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>Transaction ID: 00111.E21778</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>9</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">9.56</td> </tr> </table> <p>[MEMO ITEM] MEMO: OFFICE SUPPLIES</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	2	/	2	0	9	9	9.56
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	2	/	2	0	9	9													
9.56																						
<p>B. Full Name (Last, First, Middle Initial) Kroger Grocery Store</p> <p>Mailing Address 1776 East Northfield Boulevard</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement office supplies</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>Transaction ID: 00111.E21780</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>9</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">4.25</td> </tr> </table> <p>[MEMO ITEM] MEMO: OFFICE SUPPLIES</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	5	/	2	0	9	9	4.25
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	5	/	2	0	9	9													
4.25																						
<p>C. Full Name (Last, First, Middle Initial) Doubletree Hotel</p> <p>Mailing Address 801 New Hampshire Ave., NW</p> <p>City Washington State DC Zip Code 20037-2304</p> <p>Purpose of Disbursement travel expense</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>Transaction ID: 00111.E21781</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>9</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">483.99</td> </tr> </table> <p>[MEMO ITEM] MEMO: TRAVEL EXPENSE</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	0	/	2	0	9	9	483.99
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	0	/	2	0	9	9													
483.99																						

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

A.	Full Name (Last, First, Middle Initial) Longhorn Liquor Store	Transaction ID: 00111.E21801 Date of Disbursement 12 / 11 / 2009
	Mailing Address 223 NW Broad St.	Amount of Each Disbursement this Period 163.43
	City Murfreesboro State TN Zip Code 37130-	
	Purpose of Disbursement 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) ▼

[MEMO ITEM]
MEMO: RECEPTION EXPENSE

B.	Full Name (Last, First, Middle Initial) Longhorn Liquor Store	Transaction ID: 00111.E21790 Date of Disbursement 12 / 04 / 2009
	Mailing Address 223 NW Broad St.	Amount of Each Disbursement this Period 14.26
	City Murfreesboro State TN Zip Code 37130-	
	Purpose of Disbursement 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) ▼

[MEMO ITEM]
MEMO: RECEPTION EXPENSE

C.	Full Name (Last, First, Middle Initial) Frugal MacDoogal	Transaction ID: 00111.E21787 Date of Disbursement 11 / 30 / 2009
	Mailing Address 701 Division St.	Amount of Each Disbursement this Period 74.22
	City Nashville State TN Zip Code 37203-	
	Purpose of Disbursement 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) ▼

[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) Frugal MacDoogal	Transaction ID: 00111.E21786 Date of Disbursement 11 / 25 / 2009
	Mailing Address 701 Division St.	Amount of Each Disbursement this Period 14.18
	City Nashville State TN Zip Code 37203-	
	Purpose of Disbursement 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) ▼

[MEMO ITEM]
MEMO: RECEPTION EXPENSE

B.	Full Name (Last, First, Middle Initial) Barnes & Noble	Transaction ID: 00111.E21789 Date of Disbursement 12 / 02 / 2009
	Mailing Address 2615 Medical Center Pkwy.	Amount of Each Disbursement this Period 62.77
	City Murfreesboro State TN Zip Code 37129-	
	Purpose of Disbursement office supplies 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) ▼

[MEMO ITEM]
MEMO: OFFICE SUPPLIES

C.	Full Name (Last, First, Middle Initial) Barnes & Noble	Transaction ID: 00111.E21784 Date of Disbursement 11 / 23 / 2009
	Mailing Address 2615 Medical Center Pkwy.	Amount of Each Disbursement this Period 14.81
	City Murfreesboro State TN Zip Code 37129-	
	Purpose of Disbursement office supplies 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) ▼

[MEMO ITEM]
MEMO: OFFICE SUPPLIES

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

<p>A. Full Name (Last, First, Middle Initial) T-Mobile Phone Service</p> <p>Mailing Address 1810 Old Fort Parkway Suite D</p> <p>City Murfreesboro State TN Zip Code 37130-</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>Transaction ID: 00111.E21803</p> <p>Date of Disbursement 12 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 63.57</p> <p>[MEMO ITEM] MEMO: MOBILE PHONE SERVICE</p>
<p>B. Full Name (Last, First, Middle Initial) Macaroni Grill Restaurant</p> <p>Mailing Address 25535 Medical Center Parkway</p> <p>City Murfreesboro State TN Zip Code 37129-</p> <p>Purpose of Disbursement staff meals</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>Transaction ID: 00111.E21809</p> <p>Date of Disbursement 12 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 28.15</p> <p>[MEMO ITEM] MEMO: STAFF MEALS</p>
<p>C. Full Name (Last, First, Middle Initial) Buffalo Wild Wings</p> <p>Mailing Address 207 B Mall Circle Dr.</p> <p>City Murfreesboro State TN Zip Code 37129-</p> <p>Purpose of Disbursement staff meals</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>Transaction ID: 00111.E21782</p> <p>Date of Disbursement 11 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 91.63</p> <p>[MEMO ITEM] MEMO: STAFF MEALS</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

Use separate schedule(s)
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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

A.	Full Name (Last, First, Middle Initial) Calvert Woodley Wine & Liquor	Transaction ID: 00111.E21808 Date of Disbursement 12 / 18 / 2009
	Mailing Address 4339 Connecticut Ave. NW	Amount of Each Disbursement this Period 287.37
	City Washington State DC Zip Code 20008-	
	Purpose of Disbursement 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) ▼
		[MEMO ITEM] MEMO: RECEPTION EXPENSE

B.	Full Name (Last, First, Middle Initial) Calvert Woodley Wine & Liquor	Transaction ID: 00111.E21807 Date of Disbursement 12 / 16 / 2009
	Mailing Address 4339 Connecticut Ave. NW	Amount of Each Disbursement this Period 653.40
	City Washington State DC Zip Code 20008-	
	Purpose of Disbursement 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) ▼
		[MEMO ITEM] MEMO: RECEPTION EXPENSE

C.	Full Name (Last, First, Middle Initial) Calvert Woodley Wine & Liquor	Transaction ID: 00111.E21806 Date of Disbursement 12 / 16 / 2009
	Mailing Address 4339 Connecticut Ave. NW	Amount of Each Disbursement this Period 842.94
	City Washington State DC Zip Code 20008-	
	Purpose of Disbursement 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) ▼
		[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)
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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

A. Full Name (Last, First, Middle Initial) Chase Credit Card Services <hr/> Mailing Address P.O. Box 940414 <hr/> City Palatine State IL Zip Code 60094- <hr/> Purpose of Disbursement CREDIT CARD: SEE BELOW 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: 00126.E21830 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 541.14
	Category/ Type
	CREDIT CARD: SEE BELOW

B. Full Name (Last, First, Middle Initial) Southwest Air <hr/> Mailing Address P.O. Box 36647-1CR <hr/> City Dallas State TX Zip Code 75235- <hr/> Purpose of Disbursement travel 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) ▼	Transaction ID: 00126.E21834 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 10.00
	Category/ Type
	[MEMO ITEM] MEMO: TRAVEL EXPENSE

C. Full Name (Last, First, Middle Initial) Southwest Air <hr/> Mailing Address P.O. Box 36647-1CR <hr/> City Dallas State TX Zip Code 75235- <hr/> Purpose of Disbursement travel 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) ▼	Transaction ID: 00126.E21835 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 358.40
	Category/ Type
	[MEMO ITEM] MEMO: TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	541.14
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

<p>A. Full Name (Last, First, Middle Initial) Chase Credit Card Services</p> <p>Mailing Address P.O. Box 940414</p> <p>City Palatine State IL Zip Code 60094-</p> <p>Purpose of Disbursement CREDIT CARD: SEE BELOW</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>Transaction ID: 00408.E21849 Date of Disbursement: 02 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 368.23</p> <p>CREDIT CARD: SEE BELOW</p>
<p>B. Full Name (Last, First, Middle Initial) Kroger Grocery Store</p> <p>Mailing Address 1776 East Northfield Boulevard</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement office supplies</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>Transaction ID: 00408.E21862 Date of Disbursement: 12 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 5.57</p> <p>[MEMO ITEM] MEMO: OFFICE SUPPLIES</p>
<p>C. Full Name (Last, First, Middle Initial) Kroger Grocery Store</p> <p>Mailing Address 1776 East Northfield Boulevard</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement office supplies</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>Transaction ID: 00408.E21863 Date of Disbursement: 01 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 3.50</p> <p>[MEMO ITEM] MEMO: OFFICE SUPPLIES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

368.23

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Kroger Grocery Store <hr/> Mailing Address 1776 East Northfield Boulevard <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement office supplies 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: 00408.E21861 Date of Disbursement 12 / 28 / 2009 <hr/> Amount of Each Disbursement this Period 6.80 <hr/> [MEMO ITEM] MEMO: OFFICE SUPPLIES
B.	Full Name (Last, First, Middle Initial) Kroger Grocery Store <hr/> Mailing Address 1776 East Northfield Boulevard <hr/> City Murfreesboro State TN Zip Code 37130- <hr/> Purpose of Disbursement office supplies 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: 00408.E21860 Date of Disbursement 12 / 27 / 2009 <hr/> Amount of Each Disbursement this Period 16.89 <hr/> [MEMO ITEM] MEMO: OFFICE SUPPLIES
C.	Full Name (Last, First, Middle Initial) Barnes & Noble <hr/> Mailing Address 2615 Medical Center Pkwy. <hr/> City Murfreesboro State TN Zip Code 37129- <hr/> Purpose of Disbursement office supplies 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: 00408.E21864 Date of Disbursement 12 / 28 / 2009 <hr/> Amount of Each Disbursement this Period 44.50 <hr/> [MEMO ITEM] MEMO: OFFICE SUPPLIES

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) T-Mobile Phone Service	Transaction ID: 00408.E21869 Date of Disbursement 01 / 14 / 2010
	Mailing Address 1810 Old Fort Parkway Suite D	Amount of Each Disbursement this Period 63.57
	City Murfreesboro State TN Zip Code 37130-	
	Purpose of Disbursement mobile phone service	[MEMO ITEM] MEMO: 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) ▼	

B.	Full Name (Last, First, Middle Initial) U.S. House of Representatives	Transaction ID: 00408.E21859 Date of Disbursement 12 / 23 / 2009
	Mailing Address Gift Shop Longworth HOB	Amount of Each Disbursement this Period 166.00
	City Washington State DC Zip Code 20003-	
	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) Buffalo Wild Wings	Transaction ID: 00408.E21856 Date of Disbursement 12 / 22 / 2009
	Mailing Address 207 B Mall Circle Dr.	Amount of Each Disbursement this Period 148.53
	City Murfreesboro State TN Zip Code 37129-	
	Purpose of Disbursement staff meals	[MEMO ITEM] MEMO: 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) ▼	

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) Calvert Woodley Wine & Liquor	Transaction ID: 00408.E21855 Date of Disbursement 12 / 23 / 2009
	Mailing Address 4339 Connecticut Ave. NW	Amount of Each Disbursement this Period 323.65
	City Washington State DC Zip Code 20008-	
	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) ▼	

B.	Full Name (Last, First, Middle Initial) Chase Credit Card Services	Transaction ID: 00408.E21893 Date of Disbursement 02 / 26 / 2010
	Mailing Address P.O. Box 940414	Amount of Each Disbursement this Period 1223.08
	City Palatine State IL Zip Code 60094-	
	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) ▼	

C.	Full Name (Last, First, Middle Initial) GoDaddy .com	Transaction ID: 00408.E21888 Date of Disbursement 02 / 10 / 2010
	Mailing Address 14455 N. Hayden Rd. Suite 219	Amount of Each Disbursement this Period 59.64
	City Scottsdale State AZ Zip Code 85260-6947	
	Purpose of Disbursement campaign website	[MEMO ITEM] MEMO: CAMPAIGN WEBSITE
	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)	▶	1223.08
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 36 / 74

<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) Renaissance Hotel	Transaction ID: 00408.E21883 Date of Disbursement 01 / 23 / 2010
	Mailing Address 999 9th Street, NW	Amount of Each Disbursement this Period 495.82
	City Washington State DC Zip Code 20001-	
	Purpose of Disbursement travel	[MEMO ITEM] MEMO: TRAVEL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Central Parking	Transaction ID: 00408.E21886 Date of Disbursement 02 / 04 / 2010
	Mailing Address 937 Church St.	Amount of Each Disbursement this Period 6.00
	City Nashville State TN Zip Code 37203-	
	Purpose of Disbursement parking	[MEMO ITEM] MEMO: PARKING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Central Parking	Transaction ID: 00408.E21885 Date of Disbursement 02 / 02 / 2010
	Mailing Address 937 Church St.	Amount of Each Disbursement this Period 6.00
	City Nashville State TN Zip Code 37203-	
	Purpose of Disbursement parking	[MEMO ITEM] MEMO: PARKING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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) Central Parking	Transaction ID: 00408.E21884 Date of Disbursement 01 / 25 / 2010
	Mailing Address 937 Church St.	Amount of Each Disbursement this Period 6.00
	City Nashville State TN Zip Code 37203-	
	Purpose of Disbursement parking 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) ▼
		[MEMO ITEM] MEMO: PARKING

B.	Full Name (Last, First, Middle Initial) Central Parking	Transaction ID: 00408.E21892 Date of Disbursement 02 / 11 / 2010
	Mailing Address 937 Church St.	Amount of Each Disbursement this Period 6.00
	City Nashville State TN Zip Code 37203-	
	Purpose of Disbursement parking 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) ▼
		[MEMO ITEM] MEMO: PARKING

C.	Full Name (Last, First, Middle Initial) Central Parking	Transaction ID: 00408.E21877 Date of Disbursement 01 / 12 / 2010
	Mailing Address 937 Church St.	Amount of Each Disbursement this Period 6.00
	City Nashville State TN Zip Code 37203-	
	Purpose of Disbursement parking 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) ▼
		[MEMO ITEM] MEMO: PARKING

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)
Chase Credit Card Services

Mailing Address P.O. Box 940414

City State Zip Code
Palatine IL 60094-

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00408.E21908
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

493.27

CREDIT CARD: SEE BELOW

B.

Full Name (Last, First, Middle Initial)
Stones River Beverage

Mailing Address 208 N. Thompson Lane

City State Zip Code
Murfreesboro TN 37129-

Purpose of Disbursement
reception expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00408.E21910
Date of Disbursement

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

Amount of Each Disbursement this Period

70.19

[MEMO ITEM]
MEMO: RECEPTION EXPENSE

C.

Full Name (Last, First, Middle Initial)
Longhorn Liquor Store

Mailing Address 223 NW Broad St.

City State Zip Code
Murfreesboro TN 37130-

Purpose of Disbursement
reception expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00408.E21914
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	1	0

Amount of Each Disbursement this Period

75.66

[MEMO ITEM]
MEMO: RECEPTION EXPENSE

SUBTOTAL of Disbursements This Page (optional) ►

493.27

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) T-Mobile Phone Service	Transaction ID: 00408.E21917 Date of Disbursement MM / DD / YYYY 02 / 14 / 2010
	Mailing Address 1810 Old Fort Parkway Suite D	Amount of Each Disbursement this Period 63.84
	City Murfreesboro State TN Zip Code 37130-	
	Purpose of Disbursement mobile phone 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) ▼

[MEMO ITEM]
MEMO: MOBILE PHONE SERVICE

B.	Full Name (Last, First, Middle Initial) Demos Restaurant	Transaction ID: 00408.E21919 Date of Disbursement MM / DD / YYYY 02 / 19 / 2010
	Mailing Address 1115 NW Broad St.	Amount of Each Disbursement this Period 14.05
	City Murfreesboro State TN Zip Code 37129-	
	Purpose of Disbursement staff meals	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) ▼

[MEMO ITEM]
MEMO: STAFF MEALS

C.	Full Name (Last, First, Middle Initial) TGI Fridays Restaurant	Transaction ID: 00408.E21918 Date of Disbursement MM / DD / YYYY 02 / 16 / 2010
	Mailing Address 1714 Old Fort Pkwy	Amount of Each Disbursement this Period 40.75
	City Murfreesboro State TN Zip Code 37129-	
	Purpose of Disbursement staff meals	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) ▼

[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)

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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) Buffalo Wild Wings Mailing Address 207 B Mall Circle Dr. 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: 00408.E21916 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 139.15
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: 00408.E21923 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 137.11
C.	Full Name (Last, First, Middle Initial) Toots Restaurant Mailing Address 860 N.W. 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: 00412.E21973 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 0	Amount of Each Disbursement this Period 17.50

[MEMO ITEM]
MEMO: STAFF MEALS

CREDIT CARD: SEE BELOW

[MEMO ITEM]
MEMO: STAFF MEALS

SUBTOTAL of Disbursements This Page (optional) ▶

137.11

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)
DR Symantec

Mailing Address 20330 Stevens Creek Blvd.

City State Zip Code
Cupertino CA 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: 00412.E21990
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	1	0

Amount of Each Disbursement this Period

76.81

[MEMO ITEM]
MEMO: COMPUTER SOFTWARE

B.

Full Name (Last, First, Middle Initial)
Chase Credit Card Services

Mailing Address P.O. Box 940414

City State Zip Code
Palatine IL 60094-

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00408.E21966
Date of Disbursement

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

Amount of Each Disbursement this Period

1733.94

CREDIT CARD: SEE BELOW

C.

Full Name (Last, First, Middle Initial)
Stones River Beverage

Mailing Address 208 N. Thompson Lane

City State Zip Code
Murfreesboro TN 37129-

Purpose of Disbursement
reception expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00412.E21980
Date of Disbursement

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

Amount of Each Disbursement this Period

16.45

[MEMO ITEM]
MEMO: RECEPTION EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

1733.94

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) Molly Malones <hr/> Mailing Address 713 8th Street <hr/> City Washington State DC Zip Code 20003- <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: 00412.E21989 Date of Disbursement 03 / 20 / 2010 <hr/> Amount of Each Disbursement this Period 95.00 <hr/> [MEMO ITEM] MEMO: RECEPTION EXPENSE
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: 00412.E21982 Date of Disbursement 03 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 63.84 <hr/> [MEMO ITEM] MEMO: MOBILE PHONE SERVICE
C.	Full Name (Last, First, Middle Initial) Logans Roadhouse <hr/> Mailing Address 740 NW Broad St. <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: 00412.E21983 Date of Disbursement 03 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 142.53 <hr/> [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)

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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) AP CA State Society <hr/> Mailing Address 1608 Rhode Island Ave., NW 2nd Floor <hr/> City Washington State DC Zip Code 20036- <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) ▼	Transaction ID: 00412.E21984 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 900.00 <hr/> [MEMO ITEM] MEMO: RECEPTION EXPENSE
B.	Full Name (Last, First, Middle Initial) 42nd Degree Catering Services <hr/> Mailing Address 1104 Taft Street Rockville <hr/> City Rockville State MD Zip Code 20850- <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) ▼	Transaction ID: 00120.E21822 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 3154.25 <hr/> RECEPTION EXPENSE
C.	Full Name (Last, First, Middle Initial) Gallatin Chamber of Commerce <hr/> Mailing Address 118 W. Main St. P.O. Box 26 <hr/> City Gallatin State TN Zip Code 37066- <hr/> Purpose of Disbursement membership dues 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: 00111.E21755 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 110.00 <hr/> MEMBERSHIP DUES

SUBTOTAL of Disbursements This Page (optional) ▶

3264.25

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

<p>A. Full Name (Last, First, Middle Initial) Sams Club</p> <p>Mailing Address 125 John R. Rice Blvd.</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement office supplies</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>Transaction ID: 00408.E21904</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="210.00"/></p> <p>OFFICE SUPPLIES</p>
<p>B. Full Name (Last, First, Middle Initial) Heather Dumont</p> <p>Mailing Address 160 2nd Ave. N Apt. 200</p> <p>City Nashville State TN Zip Code 37201-</p> <p>Purpose of Disbursement wages</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>Transaction ID: 00111.E21754</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="752.06"/></p> <p>WAGES</p>
<p>C. Full Name (Last, First, Middle Initial) Heather Dumont</p> <p>Mailing Address 160 2nd Ave. N Apt. 200</p> <p>City Nashville State TN Zip Code 37201-</p> <p>Purpose of Disbursement wages</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>Transaction ID: 00115.E21817</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="752.06"/></p> <p>WAGES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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>A. Full Name (Last, First, Middle Initial) Heather Dumont</p> <p>Mailing Address 160 2nd Ave. N Apt. 200</p> <p>City Nashville State TN Zip Code 37201-</p> <p>Purpose of Disbursement wages</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>Transaction ID: 00408.E21844</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="752.06"/></p> <p>WAGES</p>
<p>B. Full Name (Last, First, Middle Initial) Heather Dumont</p> <p>Mailing Address 160 2nd Ave. N Apt. 200</p> <p>City Nashville State TN Zip Code 37201-</p> <p>Purpose of Disbursement wages</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>Transaction ID: 00408.E21853</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="752.06"/></p> <p>WAGES</p>
<p>C. Full Name (Last, First, Middle Initial) Heather Dumont</p> <p>Mailing Address 160 2nd Ave. N Apt. 200</p> <p>City Nashville State TN Zip Code 37201-</p> <p>Purpose of Disbursement wages</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>Transaction ID: 00408.E21895</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="752.06"/></p> <p>WAGES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

<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>A. Full Name (Last, First, Middle Initial) Heather Dumont</p> <p>Mailing Address 160 2nd Ave. N Apt. 200</p> <p>City Nashville State TN Zip Code 37201-</p> <p>Purpose of Disbursement wages</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>Transaction ID: 00408.E21905</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="752.06"/></p> <p>WAGES</p>
<p>B. Full Name (Last, First, Middle Initial) Heather Dumont</p> <p>Mailing Address 160 2nd Ave. N Apt. 200</p> <p>City Nashville State TN Zip Code 37201-</p> <p>Purpose of Disbursement wages</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>Transaction ID: 00408.E21928</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="752.06"/></p> <p>WAGES</p>
<p>C. Full Name (Last, First, Middle Initial) Murfreesboro Electric Department</p> <p>Mailing Address 205 N. Walnut St. P.O. Box 9</p> <p>City Murfreesboro State TN Zip Code 37133-0009</p> <p>Purpose of Disbursement utilities</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>Transaction ID: 00120.E21824</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="54.10"/></p> <p>UTILITIES</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1558.22"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Murfreesboro Electric Department Mailing Address 205 N. Walnut St. P.O. Box 9 City Murfreesboro State TN Zip Code 37133-0009 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: 00408.E21874 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 1 0 Amount of Each Disbursement this Period 64.46 UTILITIES	
B.	Full Name (Last, First, Middle Initial) Murfreesboro Electric Department Mailing Address 205 N. Walnut St. P.O. Box 9 City Murfreesboro State TN Zip Code 37133-0009 Purpose of Disbursement utilites 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: 00408.E21924 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 1 0 Amount of Each Disbursement this Period 68.00 UTILITES	
C.	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 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: 00408.E21847 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 1 0 Amount of Each Disbursement this Period 282.25 EMPLOYMENT INSURANCE	

SUBTOTAL of Disbursements This Page (optional) ▶	414.71
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

<p>A. Full Name (Last, First, Middle Initial) Atmos Energy</p> <p>Mailing Address P.O. Box 1313</p> <p>City Murfreesboro State TN Zip Code 37133-</p> <p>Purpose of Disbursement utilities</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>Transaction ID: 00126.E21838</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="121.36"/></p> <p>UTILITIES</p>
<p>B. Full Name (Last, First, Middle Initial) Atmos Energy</p> <p>Mailing Address P.O. Box 1313</p> <p>City Murfreesboro State TN Zip Code 37133-</p> <p>Purpose of Disbursement utilities</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>Transaction ID: 00408.E21873</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="112.46"/></p> <p>UTILITIES</p>
<p>C. Full Name (Last, First, Middle Initial) Atmos Energy</p> <p>Mailing Address P.O. Box 1313</p> <p>City Murfreesboro State TN Zip Code 37133-</p> <p>Purpose of Disbursement utilities</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>Transaction ID: 00408.E21920</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="113.40"/></p> <p>UTILITES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Copy Express Mailing Address 320 North Maple Street City Murfreesboro State TN Zip Code 37130- Purpose of Disbursement printing 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: 00126.E21839 Date of Disbursement 01 / 25 / 2010 Amount of Each Disbursement this Period 1061.00 PRINTING
B.	Full Name (Last, First, Middle Initial) U.S. Capitol Historical Society Mailing Address 200 Maryland Ave., NE City Washington State DC Zip Code 20002- Purpose of Disbursement portrait 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: 00408.E21939 Date of Disbursement 03 / 18 / 2010 Amount of Each Disbursement this Period 12500.00 PORTRAIT
C.	Full Name (Last, First, Middle Initial) Aristotle Industries Mailing Address 205 Pennsylvania Ave. SE City Washington State DC Zip Code 20003- Purpose of Disbursement computer software 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: 00126.E21840 Date of Disbursement 01 / 25 / 2010 Amount of Each Disbursement this Period 1575.00 COMPUTER SOFTWARE

SUBTOTAL of Disbursements This Page (optional) ▶	15136.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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>A. Full Name (Last, First, Middle Initial) Aristotle Industries</p> <p>Mailing Address 205 Pennsylvania Ave. SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement computer software</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>Transaction ID: 00408.E21843</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1575.00"/></p> <p>COMPUTER SOFTWARE</p>
<p>B. Full Name (Last, First, Middle Initial) Anna Kelma</p> <p>Mailing Address 915 A Murfree Drive</p> <p>City Murfreesboro State TN Zip Code 37129-</p> <p>Purpose of Disbursement wages</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>Transaction ID: 00408.E21897</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.17"/></p> <p>WAGES</p>
<p>C. Full Name (Last, First, Middle Initial) Miller & Loughry</p> <p>Mailing Address 214 West College Street</p> <p>City Murfreesboro State TN Zip Code 37130-3532</p> <p>Purpose of Disbursement Insurance</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>Transaction ID: 00120.E21821</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="377.76"/></p> <p>INSURANCE</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1962.93"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

<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) 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: 00111.E21757 Date of Disbursement 01 / 11 / 2010 Amount of Each Disbursement this Period 618.56 TELEPHONE SERVICE
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: 00408.E21848 Date of Disbursement 02 / 03 / 2010 Amount of Each Disbursement this Period 589.63 TELEPHONE SERVICE
C.	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: 00408.E21875 Date of Disbursement 02 / 26 / 2010 Amount of Each Disbursement this Period 368.61 TELEPHONE SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶

1576.80

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

<p>A. Full Name (Last, First, Middle Initial) AT & T</p> <p>Mailing Address P.O. Box 55000</p> <p>City Detroit State MI Zip Code 48255-</p> <p>Purpose of Disbursement telephone 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>Transaction ID: 00408.E21925</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="348.82"/></p> <p>TELEPHONE SERVICE</p>
<p>B. Full Name (Last, First, Middle Initial) Storage Plex</p> <p>Mailing Address 2365 S. Church St.</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement rent on storage unit</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>Transaction ID: 00115.E21816</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1140.00"/></p> <p>RENT ON STORAGE UNIT</p>
<p>C. Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 825 S. Church Street</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement postage</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>Transaction ID: 00111.E21752</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.11"/></p> <p>POSTAGE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

<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) United States Post Office	Transaction ID: 00115.E21814 Date of Disbursement 01 / 14 / 2010
	Mailing Address 825 S. Church Street	Amount of Each Disbursement this Period 29.41
	City Murfreesboro State TN Zip Code 37130- Purpose of Disbursement postage 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) ▼
		POSTAGE

B.	Full Name (Last, First, Middle Initial) United States Post Office	Transaction ID: 00120.E21820 Date of Disbursement 01 / 15 / 2010
	Mailing Address 825 S. Church Street	Amount of Each Disbursement this Period 44.64
	City Murfreesboro State TN Zip Code 37130- Purpose of Disbursement postage 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) ▼
		POSTAGE

C.	Full Name (Last, First, Middle Initial) United States Post Office	Transaction ID: 00126.E21827 Date of Disbursement 01 / 20 / 2010
	Mailing Address 825 S. Church Street	Amount of Each Disbursement this Period 13.84
	City Murfreesboro State TN Zip Code 37130- Purpose of Disbursement postage 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) ▼
		POSTAGE

SUBTOTAL of Disbursements This Page (optional)	87.89
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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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) 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: 00408.E21850 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 1 0	Amount of Each Disbursement this Period 8.65 POSTAGE
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: 00408.E21851 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 1 0	Amount of Each Disbursement this Period 4.90 POSTAGE
C.	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: 00408.E21903 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 3.29 POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶

16.84

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

<p>A. Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 825 S. Church Street</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement postage</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>Transaction ID: 00408.E21931</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="232.10"/></p> <p>POSTAGE</p>
<p>B. Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 825 S. Church Street</p> <p>City Murfreesboro State TN Zip Code 37130-</p> <p>Purpose of Disbursement Business Reply Account</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>Transaction ID: 00408.E21932</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="770.00"/></p> <p>BUSINESS REPLY ACCOUNT</p>
<p>C. Full Name (Last, First, Middle Initial) Hyatt Regency</p> <p>Mailing Address P.O. Box 619014</p> <p>City Dallas State TX Zip Code 75261-</p> <p>Purpose of Disbursement reception expense</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>Transaction ID: 00111.E21753</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2845.14"/></p> <p>RECEPTION EXPENSE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Beauvoir School <hr/> Mailing Address 3500 Woodley Road, NW <hr/> City Washington State DC Zip Code 20016- <hr/> Purpose of Disbursement donation Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 00408.E21969 Date of Disbursement 03 / 11 / 2010 <hr/> Amount of Each Disbursement this Period 2500.00 <hr/> DONATION
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 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 00408.E21846 Date of Disbursement 01 / 31 / 2010 <hr/> Amount of Each Disbursement this Period 6404.80 <hr/> TAX PAYMENT
C.	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 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 00408.E21902 Date of Disbursement 03 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 4860.34 <hr/> TAX PAYMENT

SUBTOTAL of Disbursements This Page (optional) ▶

13765.14

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Target Store <hr/> Mailing Address 1851 Old Fort Pkwy <hr/> City Murfreesboro State TN Zip Code 37129- <hr/> Purpose of Disbursement office supplies 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: 00111.E21751 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 41.79 <hr/> OFFICE SUPPLIES
B.	Full Name (Last, First, Middle Initial) Benenson Strategy Group <hr/> Mailing Address 1000 Potomac Street, N.W. Suite 420 <hr/> City Washington State DC Zip Code 20007- <hr/> Purpose of Disbursement polling 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: 00126.E21841 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 14500.00 <hr/> POLLING
C.	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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00111.E21750 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 169.20 <hr/> MILEAGE REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ▶	14710.99
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.	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: 00408.E21842 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 1 0	Amount of Each Disbursement this Period 2160.75 WAGES
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: 00408.E21894 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 1 0	Amount of Each Disbursement this Period 2160.75 WAGES
C.	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: 00408.E21929 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 0	Amount of Each Disbursement this Period 2160.75 WAGES

SUBTOTAL of Disbursements This Page (optional)	6482.25
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) Robertson County Times Mailing Address P.O. Box 637 City Springfield State TN Zip Code 37172- Purpose of Disbursement subscription 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: 00111.E21759 Date of Disbursement 01 / 11 / 2010 Amount of Each Disbursement this Period 52.68 SUBSCRIPTION	
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: 00111.E21756 Date of Disbursement 01 / 11 / 2010 Amount of Each Disbursement this Period 546.84 MOBILE PHONE SERVICE	
C.	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: 00408.E21871 Date of Disbursement 02 / 26 / 2010 Amount of Each Disbursement this Period 189.29 MOBILE PHONE SERVICE	

SUBTOTAL of Disbursements This Page (optional) ▶	788.81
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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) 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: 00408.E21900 Date of Disbursement 03 / 08 / 2010	Amount of Each Disbursement this Period 192.61 MOBILE PHONE SERVICE
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: 00408.E21934 Date of Disbursement 03 / 31 / 2010	Amount of Each Disbursement this Period 187.61 MOBILE PHONE SERVICE
C.	Full Name (Last, First, Middle Initial) Queenie Woods Mailing Address 441 Evergreen Street City Murfreesboro State TN Zip Code 37130- Purpose of Disbursement cleaning 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: 00120.E21823 Date of Disbursement 01 / 20 / 2010	Amount of Each Disbursement this Period 90.00 CLEANING SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶

470.22

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.

Full Name (Last, First, Middle Initial)
Queenie Woods

Mailing Address 441 Evergreen Street

City Murfreesboro State TN Zip Code 37130-

Purpose of Disbursement
cleaning service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00408.E21930

Date of Disbursement

/ /

Amount of Each Disbursement this Period

90.00

CLEANING SERVICE

SUBTOTAL of Disbursements This Page (optional)

90.00

TOTAL This Period (last page this line number only)

86138.60

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Comm. <hr/> Mailing Address 430 South Capitol Street <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement DONATION OF EXCESS CAMPAIGN FUNDS <hr/> Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> State: District:	Transaction ID: 00408.E21921 Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 4600.00
B.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Comm. <hr/> Mailing Address 430 South Capitol Street <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement DONATION OF EXCESS CAMPAIGN FUNDS <hr/> Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> State: District:	Transaction ID: 00408.E21898 Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2010 <hr/> Amount of Each Disbursement this Period 10000.00
C.	Full Name (Last, First, Middle Initial) TN House-Senate Joint Democratic Caucus <hr/> Mailing Address 223 8th Avenue North <hr/> City Nashville State TN Zip Code 37203-3513 <hr/> Purpose of Disbursement DONATION <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> State: District:	Transaction ID: 00115.E21810 Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2010 <hr/> Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

19600.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

<p>A. Full Name (Last, First, Middle Initial) Jack Evans For City Council</p> <p>Mailing Address 441 4th Street, NW</p> <p>City Washington State DC Zip Code 20001-</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 State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21937</p> <p>Date of Disbursement 03 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Alan Grayson For Congress</p> <p>Mailing Address 2206 E. Colonial Drive</p> <p>City Orlando State FL Zip Code 32803-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name ALAN MARK GRAYSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21949</p> <p>Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Alan Mollohan For Congress</p> <p>Mailing Address West Virginia District 1 P.O. Box 1343</p> <p>City Fairmont State WV Zip Code 26555-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name ALAN B. MOLLOHAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21953</p> <p>Date of Disbursement 01 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A. Full Name (Last, First, Middle Initial) Alan Mollohan For Congress Mailing Address West Virginia District 1 P.O. Box 1343 City Fairmont State WV Zip Code 26555- Purpose of Disbursement DONATION Candidate Name ALAN B. MOLLOHAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00408.E21942 Date of Disbursement 03 / 24 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	donation
	donation

B. Full Name (Last, First, Middle Initial) Baron Hill for Congress Mailing Address Indiana, 9th District P.O. Box 1071 City Seymour State IN Zip Code 47274- Purpose of Disbursement DONATION Candidate Name BARON PAUL HILL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00408.E21950 Date of Disbursement 03 / 24 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	donation
	donation

C. Full Name (Last, First, Middle Initial) Betsy Markey For Congress Mailing Address Colorado 4th District P.O. Box 1333 City Fort Collins State CO Zip Code 80522- Purpose of Disbursement DONATION Candidate Name BETSY MARKEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00408.E21956 Date of Disbursement 03 / 24 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	donation
	donation

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Chet Edwards for Congress Mailing Address Texas District 17 P.O. Box 23273 City Waco State TX Zip Code 76702- Purpose of Disbursement DONATION Candidate Name CHET EDWARDS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 17	Transaction ID: 00408.E21941 Date of Disbursement 03 / 24 / 2010	Amount of Each Disbursement this Period 1000.00 donation
B.	Full Name (Last, First, Middle Initial) Chris Carney For Congress Mailing Address Pennsylvania 10th District P.O. Box A City Clarks Summit State PA Zip Code 18411- Purpose of Disbursement DONATION Candidate Name CHRISTOPHER P CARNEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 10	Transaction ID: 00408.E21959 Date of Disbursement 03 / 24 / 2010	Amount of Each Disbursement this Period 1000.00 donation
C.	Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress Mailing Address North Dakota, AL P.O. Box 746 City Bismarck State ND Zip Code 58502- Purpose of Disbursement DONATION Candidate Name CHET EDWARDS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 17	Transaction ID: 00408.E21940 Date of Disbursement 03 / 24 / 2010	Amount of Each Disbursement this Period 1000.00 donation

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

A.	Full Name (Last, First, Middle Initial) Gabrielle Giffords For Congress	Transaction ID: 00408.E21948 Date of Disbursement
	Mailing Address Arizona District 8 P.O. Box 12886	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City Tucson State AZ Zip Code 85726-	Amount of Each Disbursement this Period
	Purpose of Disbursement DONATION	<input type="text" value="1000.00"/>
	Candidate Name GABRIELLE GIFFORDS	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: AZ District: 08	donation

B.	Full Name (Last, First, Middle Initial) Gary Peters For Congress	Transaction ID: 00408.E21951 Date of Disbursement
	Mailing Address Michigan District 9 P.O. Box 226	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City Bloomfield Hills State MI Zip Code 48303-	Amount of Each Disbursement this Period
	Purpose of Disbursement DONATION	<input type="text" value="1000.00"/>
	Candidate Name GARY PETERS	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MI District: 09	donation

C.	Full Name (Last, First, Middle Initial) Gerry Connolly For Congress	Transaction ID: 00408.E21961 Date of Disbursement
	Mailing Address Virginia.11th District PO Box 563	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City Merrifield State VA Zip Code 22116-	Amount of Each Disbursement this Period
	Purpose of Disbursement DONATION	<input type="text" value="1000.00"/>
	Candidate Name GERRY CONNOLLY	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: VA District: 11	donation

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

<p>A. Full Name (Last, First, Middle Initial) Glenn Nye For Congress</p> <p>Mailing Address Virginia, 2nd District PO Box 68444</p> <p>City Virginia Beach State VA Zip Code 23471-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name GLENN CARLYLE NYE, III</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21963 Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p>
<p>B. Full Name (Last, First, Middle Initial) Harry Mitchell For Congress</p> <p>Mailing Address Arizona, 5th District P.O. Box 23748</p> <p>City Tempe State AZ Zip Code 85285-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name HARRY E. MITCHELL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00412.E21995 Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p>
<p>C. Full Name (Last, First, Middle Initial) Joe Donnelly For Congress</p> <p>Mailing Address Indiana 2nd District P.O. Box 1961</p> <p>City South Bend State IN Zip Code 46634-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name JOSEPH SIMON DONNELLY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21955 Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p>

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

<p>A. Full Name (Last, First, Middle Initial) John Adler For Congress</p> <p>Mailing Address New Jersey District 3 P.O. Box 1024</p> <p>City Mount Laurel State NJ Zip Code 08054-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name JOHN H. ADLER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NJ District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21946</p> <p>Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type donation</p>
<p>B. Full Name (Last, First, Middle Initial) John Bocchieri For Congress</p> <p>Mailing Address Ohio 16th District PO Box 20535</p> <p>City Canton State OH Zip Code 44701-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name JOHN A BOCCIERI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 16</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21958</p> <p>Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type donation</p>
<p>C. Full Name (Last, First, Middle Initial) Kathy Dahlkemper For Congress</p> <p>Mailing Address Pennsylvania District 3 P.O. Box 1045</p> <p>City Erie State PA Zip Code 16512-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name KATHLEEN DAHLKEMPER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21947</p> <p>Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type donation</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

<p>A. Full Name (Last, First, Middle Initial) Mark Critz For Congress</p> <p>Mailing Address Pennsylvania, District 12 647 Main Street, Ste 110</p> <p>City Johnstown State PA Zip Code 15901-</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 00408.E21922</p> <p>Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>donation</p>
<p>B. Full Name (Last, First, Middle Initial) Mark Schauer For Congress</p> <p>Mailing Address Michigan 2th District P.O. Box 100</p> <p>City Battle Creek State MI Zip Code 49016-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name MARK HAMILTON SCHAUER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District: 07</p>	<p>Transaction ID: 00408.E21964</p> <p>Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p>
<p>C. Full Name (Last, First, Middle Initial) Mike Thompson For Congress</p> <p>Mailing Address California, District 1 PO Box 10541</p> <p>City Napa State CA Zip Code 94581-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name MIKE MR. THOMPSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District: 01</p>	<p>Transaction ID: 00408.E21944</p> <p>Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Congressman Bart Gordon Committee

<p>A. Full Name (Last, First, Middle Initial) Pete Visclosky For Congress</p> <p>Mailing Address Indiana District 1 P.O. Box 10003</p> <p>City Merrillville State IN Zip Code 46411-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name PETER J VISCLOSKY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21945 Date of Disbursement: MM / DD / YYYY 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type donation</p>
<p>B. Full Name (Last, First, Middle Initial) Roy Herron For Congress</p> <p>Mailing Address Tennessee, 8th District P.O. Box 5</p> <p>City Dresden State TN Zip Code 38225-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name ROY BRASFIELD HERRON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21954 Date of Disbursement: MM / DD / YYYY 01 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Category/Type donation</p>
<p>C. Full Name (Last, First, Middle Initial) Roy Herron For Congress</p> <p>Mailing Address Tennessee, 8th District P.O. Box 5</p> <p>City Dresden State TN Zip Code 38225-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name ROY BRASFIELD HERRON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21967 Date of Disbursement: MM / DD / YYYY 03 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Category/Type donation</p>

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5000.00

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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<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>A. Full Name (Last, First, Middle Initial) Scott Murphy For Congress</p> <p>Mailing Address New York 20th District 5 South Side Drive #224</p> <p>City Clifton Park State NY Zip Code 12065-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name SCOTT M MURPHY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21962</p> <p>Date of Disbursement MM / DD / YYYY 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p>
<p>B. Full Name (Last, First, Middle Initial) Steve Cohen For Congress</p> <p>Mailing Address Tennessee District 9 707 Adams Avenue</p> <p>City Memphis State TN Zip Code 38105-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name STEPHEN IRA COHEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 09</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21943</p> <p>Date of Disbursement MM / DD / YYYY 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p>
<p>C. Full Name (Last, First, Middle Initial) Suzanne Kosmas For Congress</p> <p>Mailing Address Florida District 24 P.O. Box 1547</p> <p>City New Smyrna Beach State FL Zip Code 32170-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name SUZANNE KOSMAS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21938</p> <p>Date of Disbursement MM / DD / YYYY 03 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p>

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3000.00

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

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FOR LINE NUMBER: (check only one)

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<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>A. Full Name (Last, First, Middle Initial) Travis Childers For Congress</p> <p>Mailing Address Mississippi, 1st District P.O. Box 177</p> <p>City Booneville State MS Zip Code 38829-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name TRAVIS W CHILDERS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21960 Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type donation</p>
<p>B. Full Name (Last, First, Middle Initial) Walt Minnick For Congress</p> <p>Mailing Address Idaho District 1 PO Box 306</p> <p>City Boise State ID Zip Code 83701-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name WALTER CLIFFORD MINNICK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21957 Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type donation</p>
<p>C. Full Name (Last, First, Middle Initial) Zach Space For Congress</p> <p>Mailing Address Ohio, 18th District PO Box 266</p> <p>City Dover State OH Zip Code 44622-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name ZACHARY T SPACE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00408.E21965 Date of Disbursement 03 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type donation</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input 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>A. Full Name (Last, First, Middle Initial) Tommy Bragg For Mayor</p> <p>Mailing Address 2711 Shannon Dr</p> <p>City Murfreesboro State TN Zip Code 37129-</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 00408.E21936 Date of Disbursement 02 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Arlen Specter For Senate</p> <p>Mailing Address Pennsylvania 600 N. 2nd Street, First Floor</p> <p>City Harrisburg State PA Zip Code 17101-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name ARLEN SPECTER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: PA District: 00</p>	<p>Transaction ID: 00408.E21952 Date of Disbursement 02 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>donation</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Bill Foster</p> <p>Mailing Address P.O. Box 703</p> <p>City Geneva State IL Zip Code 60134-</p> <p>Purpose of Disbursement DONATION</p> <p>Candidate Name G. WILLIAM FOSTER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IL District: 14</p>	<p>Transaction ID: 00412.E21993 Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>donation</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional)	4000.00
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**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 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) Charlie Melancon			Transaction ID: 00412.E21994	
	Mailing Address PO Box 4147			Date of Disbursement 03 / 31 / 2010	
	City Baton Rouge	State LA	Zip Code 70821-	Amount of Each Disbursement this Period 500.00	
	Purpose of Disbursement DONATION			Category/ Type donation	
	Candidate Name CHARLES MELANCON				
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State: LA		District: 00		

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

54850.00