

SUMMARY PAGE - PAC

11. NAME OF COMMITTEE (In Full) STRONG Schools PAC	12. REPORT COVERING THE PERIOD
	FROM <u>4/27</u> TO: <u>6/30</u>

RECEIPTS

13. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>5885</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>2200</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)	\$ <u>8085</u>
14. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
15. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.)	\$ <u>8085</u>

DISBURSEMENTS

17. EXPENDITURES (other than loan payments)	
a. Unitemized Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)	
_____	\$ <u>0</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ _____
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>7071.95</u>
c. Independent Expenditures	\$ _____
d. TOTAL EXPENDITURES (other than loan repayments)(add 17.a., 17.b. and 17.c.)	\$ <u>7071.95</u>
18. LOAN REPAYMENTS MADE THIS PERIOD	\$ _____
19. TOTAL DISBURSEMENTS (add 17.d. and 18.) (must be shown in item 10.c.)	\$ <u>7071.95</u>

20. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u>0</u>
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ <u>0</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.)	\$ <u>0</u>

21. LOANS

LOANS OUTSTANDING (must be shown in item 10.e.)	\$ <u>0</u>
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22. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each)	\$ <u>0</u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>0</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown i item 10.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - PAC

1. NAME OF COMMITTEE STRONG Schools PAC			2. REPORT COVERING THE PERIOD	
			FROM: 4/27	TO: 6/30
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)				
First Name Jon	M.I.	Last Name/Organization Name Wolfe	Amount of Contribution \$1000	
Address 10300 Rocky Mosa Court				
City LAS Vegas	State NV	Zip Code 89144	Date of Contribution 5/17/14	
Occupation President		Employer Horse Advantage, LLC		
First Name Debra	M.I.	Last Name/Organization Name MAGBART	Amount of Contribution \$200	
Address 112 La Zee Drive				
City Hendersonville	State TN	Zip Code 37075	Date of Contribution 5/21/14	
Occupation Govt Relations		Employer Cruz Point		
First Name Jo Ann	M.I.	Last Name/Organization Name CRAVES	Amount of Contribution \$1000	
Address 197 Woodlake Drive				
City Collaton	State TN	Zip Code 37075	Date of Contribution 6/11/14	
Occupation		Employer		
First Name	M.I.	Last Name/Organization Name	Amount of Contribution	
Address				
City	State	Zip Code	Date of Contribution	
Occupation		Employer		
First Name	M.I.	Last Name/Organization Name	Amount of Contribution	
Address				
City	State	Zip Code	Date of Contribution	
Occupation		Employer		
First Name	M.I.	Last Name/Organization Name	Amount of Contribution	
Address				
City	State	Zip Code	Date of Contribution	
Occupation		Employer		
5. TOTAL ITEMIZED CONTRIBUTIONS				Amount \$2200
(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 13b. of summary.)				

ITEMIZED STATEMENT OF EXPENDITURES - PAC

1. NAME OF COMMITTEE <i>Strong Schools PAC</i>			2. REPORT COVERING THE PERIOD FROM: <i>4/27</i> TO: <i>6/30</i>	
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>0</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period). If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g. postage, printing) along with the candidate's name in the purpose of expenditure section.				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>Coiley Screenprinting</i>		<i>T-Shirts</i>		<i>\$238.17</i>
Address <i>491 Craighaul St.</i>				Date of Expenditure
City <i>Nashville</i>	State <i>TN</i>			Zip Code <i>37203</i>
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>Office Support Systems</i>		<i>Mail/Printing</i>		<i>\$321.74</i>
Address <i>471 Myatt Drive</i>				Date of Expenditure
City <i>MADISON</i>	State <i>TN</i>			Zip Code <i>37115</i>
First Name <i>Aimee</i>	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>RANLE</i>		<i>Expense Reimbursement</i>		<i>\$213.04</i>
Address <i>303 Sunset Island Trail</i>				Date of Expenditure
City <i>OLLATON</i>	State <i>TN</i>			Zip Code <i>37066</i>
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>Office Support Systems</i>		<i>Printing/mail</i>		<i>\$300.00</i>
Address <i>471 Myatt Drive</i>				Date of Expenditure
City <i>MADISON</i>	State <i>TN</i>			Zip Code <i>37115</i>
First Name <i>Billy</i>	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>Sloan</i>		<i>Design</i>		<i>\$299</i>
Address				Date of Expenditure
City <i>Hendersonville</i>	State <i>TN</i>			Zip Code <i>37075</i>
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				Date of Expenditure
City	State			Zip Code
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of campaign expenditures, this amount must be shown in item 17b. of summary.)				<i>7071.95</i>