

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>VOTE SAM PARKS</u>	14. REPORT COVERING THE PERIOD FROM: <u>7/1/14</u> TO: <u>9/30/14</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 0.49

b. Itemized Contributions (over \$100 from each source this period) \$ 1,550

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 1,550.49

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 1,550.49

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

<u>CHECKS</u>	\$ <u>11.95</u>
<u>SQUARE</u>	\$ <u>0.49</u>
<u>CAMPAIGN SOFTWARE</u>	\$ <u>19.00</u>
<u>FOOD FOR INTERNS</u>	\$ <u>37.15</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 68.59

b. Itemized Expenditures (Over \$100 each payee this period) \$ 301.95

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 370.44

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 370.44

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ _____

b. Itemized in-kind contributions (over \$100 from each source this period) \$ _____

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ _____

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE VOTE SAN PARKS				2. REPORT COVERING THE PERIOD FROM: 9/1/14 TO: 9/30/14		
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)						
First Name JOSHUA		Middle Name PERONA		Contribution Received For:		Amount of Contribution 150.00
Last Name/Organization Name PERONA				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address 170 GRADFORD CIRCLE						
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 9/2/14		Aggregate This Election 150.00
Occupation SALES						
Employer TRISTAR DC						
First Name SAM		Middle Name		Contribution Received For:		Amount of Contribution 300.00
Last Name/Organization Name PARKS				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address 202 KENSTONE LN						
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 9/9/14		Aggregate This Election 300.00
Occupation SALES						
Employer TRISTAR DC						
First Name BOB		Middle Name		Contribution Received For:		Amount of Contribution 200.00
Last Name/Organization Name GOODALL				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address 393 MAPLE ST SUITE 100						
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 9/15/14		Aggregate This Election 200.00
Occupation HOME BUILDER						
Employer GOODALL HOMES						
First Name JUNE		Middle Name		Contribution Received For:		Amount of Contribution 200.00
Last Name/Organization Name LAFFERTY				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address 112 Oxford Ct						
City GOONETTSVILLE		State TN	Zip Code 37072	Date of Contribution 9/9/14		Aggregate This Election 200.00
Occupation RETIRED						
Employer						
5. TOTAL ITEMIZED CONTRIBUTIONS (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 15b. of summary.)					Amount 850.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE VOTE SAN PARKS				2. REPORT COVERING THE PERIOD FROM: 7/1/14 TO: 9/30/14			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 850.00		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name JACK		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name LAFFERTY		Address 1452 BUXTON DR		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200.00	
City KNOXVILLE		State TN	Zip Code 37922	<input type="checkbox"/> Runoff (Local Elections Only)			
Occupation RETIRED		Employer		Date of Contribution 9/11/14		Aggregate This Election 200.00	
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name RESOLVE FIRST SERVICE		Address 2045 DRAKES CREEK RD		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500.00	
City HENDERSONVILLE		State TN	Zip Code 37075	<input type="checkbox"/> Runoff (Local Elections Only)			
Occupation		Employer		Date of Contribution 9/25/14		Aggregate This Election 500.00	
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
City		State	Zip Code	<input type="checkbox"/> Runoff (Local Elections Only)			
Occupation		Employer		Date of Contribution		Aggregate This Election	
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
City		State	Zip Code	<input type="checkbox"/> Runoff (Local Elections Only)			
Occupation		Employer		Date of Contribution		Aggregate This Election	
5. TOTAL ITEMIZED CONTRIBUTIONS (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 15b. of summary.)					1,550.00		



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE VOTE SAM PARKS				2. REPORT COVERING THE PERIOD FROM: 7/1/14 TO: 9/30/14			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)							
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City			State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer				Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:			
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City			State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer				Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:			
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City			State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer				Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:			
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City			State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer				Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:			
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City			State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer				Description of In-Kind Contribution	
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to Item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in Item 22b. of summary.)					0		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE VOTE SAM PARKS			2. REPORT COVERING THE PERIOD FROM: 7/1/14 TO: 9/30/14		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 0	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name		Middle Name		Purpose of Expenditure PALM CARDS	Amount of Expenditure 151.95
Last Name/Business Name BUSY BEE (PALM CARDS)					
Address 334 W MAIN ST., 1					
City HENDERSONVILLE	State TN	Zip Code 37075			
First Name ROBBIE		Middle Name C		Purpose of Expenditure GRAPHIC DESIGN	Amount of Expenditure 150.00
Last Name/Business Name GREEN					
Address					
City	State	Zip Code			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
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 expenditures, this amount must be shown in item 19b. of summary.)				301.95	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE VOTE SAM PARKS					2. REPORT COVERING THE PERIOD FROM: 7/1/14 TO: 9/30/14												
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)																	
Complete the Following for the Source of the Loan																	
First Name			Middle Name			Outstanding Loan Balance (Beginning of Period)		Loans Received		Loan Payments		Outstanding Loan Balance (End of Period)					
Last Name/Organization Name																	
Address						Loan Received For:				Date of Loan							
City						State		Zip Code		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election							
						<input type="checkbox"/> Runoff (Local Elections Only)											
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)																	
First Name				Middle Name				First Name				Middle Name					
Last Name/Organization Name								Last Name/Organization Name									
Address								Address									
City				State		Zip Code		City				State		Zip Code			
Amount Guaranteed Outstanding								Amount Guaranteed Outstanding									
First Name				Middle Name				First Name				Middle Name					
Last Name/Organization Name								Last Name/Organization Name									
Address								Address									
City				State		Zip Code		City				State		Zip Code			
Amount Guaranteed Outstanding								Amount Guaranteed Outstanding									
First Name				Middle Name				First Name				Middle Name					
Last Name/Organization Name								Last Name/Organization Name									
Address								Address									
City				State		Zip Code		City				State		Zip Code			
Amount Guaranteed Outstanding								Amount Guaranteed Outstanding									
First Name				Middle Name				First Name				Middle Name					
Last Name/Organization Name								Last Name/Organization Name									
Address								Address									
City				State		Zip Code		City				State		Zip Code			
Amount Guaranteed Outstanding								Amount Guaranteed Outstanding									
4. Totals for all Loans (complete on last page of itemized loans)										Outstanding Loan Balance (Beginning of Period)		Loans Received		Loan Payments		Outstanding Loan Balance (End of Period)	
(Total loans received should also be shown in item 16, on summary page.)																	
(Total loan payments should also be shown in item 20, on summary page.)																	
(Total outstanding loan balance should also be shown in item 12.e, on front page.)																	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>VOTE SAM PARKS</i>			2. REPORT COVERING THE PERIOD			
			FROM: <i>7/1/14</i>	TO: <i>9/30/14</i>		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)			<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>