

SUMMARY PAGE - PAC

11. NAME OF COMMITTEE (In Full) <div style="font-size: 1.5em; font-family: cursive;">STRONG Schools PAC</div>	12. REPORT COVERING THE PERIOD FROM <u>4/1/14</u> TO: <u>4/20/14</u>
RECEIPTS	
13. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 1756 ¹⁷⁵⁶ ENTIRE \$1756
b. Itemized Contributions (over \$100 from each source this period)	\$ 5100 ⁵¹⁰⁰
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)	\$ <u>6856</u>
14. LOANS RECEIVED THIS REPORTING PERIOD	\$ _____
15. INTEREST RECEIVED THIS REPORTING PERIOD	\$ _____
16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.)	\$ <u>6856</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>Event Staffing</u>	\$ <u>100.00</u>
<u>Event tickets</u>	\$ <u>80.00</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>180.00</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>4,118</u>
c. Independent Expenditures	\$ _____
d. TOTAL EXPENDITURES (other than loan repayments)(add 17.a., 17.b. and 17.c.)	\$ <u>4298</u>
18. LOAN REPAYMENTS MADE THIS PERIOD	\$ _____
19. TOTAL DISBURSEMENTS (add 17.d. and 18.) (must be shown in item 10.c.)	\$ <u>4298</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>
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 4/1/14 TO 4/26/14	
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 during the period)				
First Name David	M.I.	Last Name/Organization Name Kimbrough		Amount of Contribution \$750
Address 114 Trout Valley				Date of Contribution 4/15/14
City Hendersonville	State TN	Zip Code 37075		
Occupation Att		Employer SELF		
First Name Bill	M.I.	Last Name/Organization Name Taylor		Amount of Contribution \$1000.00
Address 131 Indian Lake Rd.				Date of Contribution 4/15/14
City Hendersonville	State TN	Zip Code 37075		
Occupation Dentist		Employer SELF		
First Name John	M.I.	Last Name/Organization Name Ganett		Amount of Contribution \$500.00
Address 116 Blue Ridge Drive				Date of Contribution 4/15/14
City Hendersonville	State TN	Zip Code 37075		
Occupation Attorney		Employer Bone McAlister		
First Name Vicki	M.I.	Last Name/Organization Name Scruggs		Amount of Contribution \$250
Address 135 Jefferson Square				Date of Contribution 4/15/14
City Nashville	State TN	Zip Code 37215		
Occupation		Employer		
First Name Charles	M.I.	Last Name/Organization Name BONE		Amount of Contribution \$250
Address 105 Riverchase				Date of Contribution 4/15/14
City Hendersonville	State TN	Zip Code 37075		
Occupation Attorney		Employer Bone McAlister		
First Name George	M.I.	Last Name/Organization Name Phillips		Amount of Contribution \$250
Address 211 Woodlake Drive				Date of Contribution 4/15/14
City Gallatin	State TN	Zip Code 37066		
Occupation Attorney		Employer Bone McAlister		
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(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.)</small>				\$3000



ITEMIZED STATEMENT OF CONTRIBUTIONS - PAC

1. NAME OF COMMITTEE STRONG SCHOOLS PAC			2. REPORT COVERING THE PERIOD	
			FROM 4/1/14 TO: 4/26/14	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 3000 THAT
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)				
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
Alvin		HALE		\$250
Address 761 Plantation Blvd.				
City	State	Zip Code		Date of Contribution
Gallatin	TN	37066		4/15/14
Occupation		Employer		
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
GARY		Kaufman		\$200
Address 1561 Oxford Ct.				
City	State	Zip Code		Date of Contribution
Gallatin	TN	37066		4/15/14
Occupation		Employer		
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
Thomas		Martin		\$250
Address 113 W. Main Street				
City	State	Zip Code		Date of Contribution
Gallatin	TN	37066		4/15/14
Occupation		Employer		
Atty.				
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
John		Pellegrin		\$500
Address 113 W. Main Street				
City	State	Zip Code		Date of Contribution
Gallatin	TN	37066		4/15/14
Occupation		Employer		
Atty.		SELF		
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
Robert		Ingram		\$150
Address 117 E. Main				
City	State	Zip Code		Date of Contribution
Gallatin	TN	37066		4/15/14
Occupation		Employer		
Atty.				
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
John		Phillips		\$250
Address 117 E. Main				
City	State	Zip Code		Date of Contribution
Gallatin	TN	37066		4/15/14
Occupation		Employer		
Atty.				
5. TOTAL ITEMIZED CONTRIBUTIONS				\$4600
(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 CONTRIBUTIONS - PAC

1. NAME OF COMMITTEE Stonewall Schools PAC			2. REPORT COVERING THE PERIOD	
			FROM: 4/1/14	TO: 4/30/14
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 4690
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)				
First Name Nancy	M.I.	Last Name/Organization Name Corley	Amount of Contribution \$250	
Address 163 Inlet				
City Hendersonville	State TN	Zip Code 37075	Date of Contribution 4/15/14	
Occupation		Employer		
First Name	M.I.	Last Name/Organization Name MARGARET Corley	Amount of Contribution \$250	
Address 112 Labor				
City Hendersonville	State TN	Zip Code 37075	Date of Contribution 4/15/14	
Occupation n/a		Employer For State Rep Campaign		
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		
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				\$4690 5100
<small>(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.)</small>				

ITEMIZED STATEMENT OF EXPENDITURES - PAC

1. NAME OF COMMITTEE STRONG SCHOOLS PAC		2. REPORT COVERING THE PERIOD FROM: 4/1/14 TO: 4/26/14	
3. TOTAL ITEMIZED 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). 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 Publix		FOOD for Fundraiser	752.20
Address			Date of Expenditure
City Hendersonville	State TN		Zip Code 37075
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Blue GRASS Beverages		Fundraising Expense	210.68
Address			Date of Expenditure
City Hendersonville	State TN		Zip Code 37075
First Name Billy	Middle Name 	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name SLOAN		Design work	\$149
Address			Date of Expenditure
City Hendersonville	State TN		Zip Code 37075
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			Date of Expenditure
City	State		Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			Date of Expenditure
City	State		Zip Code
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.)			\$1,111.88