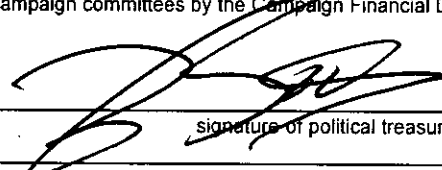



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For Multicandidate Committees (PACs)

1. DATE OF REPORT April 29, 2014		2. NAME OF COMMITTEE Maintaining Our Majority PAC	
2.A. SHORT NAME OF COMMITTEE (IF APPLICABLE) Mompaal			
3. ADDRESS AND PHONE Street or Rural Route 124 Cedar Crest		City Hendersonville	State NC
		Zip Code 27075	Phone 479 5088
4. TYPE OF CANDIDATES SUPPORTED STATE PUBLIC OFFICE <input type="checkbox"/> LOCAL PUBLIC OFFICE <input type="checkbox"/> BOTH <input checked="" type="checkbox"/>			
5.A. NAME OF POLITICAL TREASURER Paul R. Goode			5.B. DATE APPOINTED
6. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input checked="" type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
7.A. BEGINNING DATE OF REPORTING PERIOD April 1, 2014		7.B. ENDING DATE OF REPORTING PERIOD April 26, 2014	
8. (Check one) A. <input type="checkbox"/> This committee is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. I do solemnly swear or affirm that the information contained in this statement is true and that the committee has complied with all applicable provisions of the Campaign Financial Disclosure Act. (Items 10d., 10e. and 10f must also be completed.) B. <input type="checkbox"/> This committee is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period. I do solemnly swear or affirm that the information contained in this statement is true and that the following page(s) are a complete and accurate accounting of all contributions and expenditures required to be reported by political campaign committees by the Campaign Financial Disclosure Act.			
FILED 11:11 (A.M.) THU APR 28 2014 P.M.		 signature of political treasurer	
SUMNER COUNTY ELECTION COMMISSION		4/28/14 date	
 signature of witness		4/28/2014 date	
10. SUMMARY			
a. BALANCE ON HAND LAST REPORT	\$ 1584.54		
b. TOTAL RECEIPTS THIS PERIOD	\$ 200⁰⁰		
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 1000⁰⁰		
d. BALANCE ON HAND (10.a. plus 10.b. minus 10.c.)	\$ 784.54		
e. TOTAL LOANS OUTSTANDING	\$ 0		
f. TOTAL OBLIGATIONS OUTSTANDING	\$ 1200⁰⁰		



SUMMARY PAGE - PAC

11. NAME OF COMMITTEE (In Full) <i>Maintaining our Majority PAC</i>	12. REPORT COVERING THE PERIOD FROM <i>4/1/14</i> TO <i>4/26/14</i>
--	--

RECEIPTS

13. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u><i>0</i></u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u><i>200⁰⁰</i></u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)	\$ <u><i>200⁰⁰</i></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.)

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)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

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

b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u><i>1000⁰⁰</i></u>
c. Independent Expenditures	\$ <u><i>0</i></u>
d. TOTAL EXPENDITURES (other than loan repayments)(add 17.a., 17.b. and 17.c.)	\$ <u><i>1000⁰⁰</i></u>

18. LOAN REPAYMENTS MADE THIS PERIOD

19. TOTAL DISBURSEMENTS (add 17.d. and 18.) (must be shown in item 10.c.)

20. IN-KIND CONTRIBUTIONS

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

21. LOANS

LOANS OUTSTANDING (must be shown in item 10.e.)

22. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each)	\$ <u><i>0</i></u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u><i>1200⁰⁰</i></u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown i item 10.f.)	\$ <u><i>1200⁰⁰</i></u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - PAC

1. NAME OF COMMITTEE <i>Maintaining Our Majority</i>			2. REPORT COVERING THE PERIOD FROM <i>4/1/14</i> TO: <i>4/26/14</i>	
			Amount	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)				
First Name <i>Sony Bartlett</i>	M.I.	Last Name/Organization Name	Amount of Contribution <i>200.00</i>	
Address <i>164 Ashland Pt.</i>				
City <i>Hendersonville</i>	State <i>NC</i>	Zip Code <i>37075</i>	Date of Contribution <i>4/8/2014</i>	
Occupation <i>Best effort</i>		Employer <i>Best effort</i>		
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		
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				
(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>Maintaining Our Majority</i>		2. REPORT COVERING THE PERIOD FROM <i>4/1/14</i> TO <i>4/26/14</i>	
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
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>Conguest Communications</i>		<i>Survey</i>	<i>10000</i>
Address <i>2812 Emorywood Pky Ste 103</i>			Date of Expenditure
City <i>Richmond</i>	State <i>VA</i>		Zip Code <i>23294</i>
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	
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.)			<i>10000</i>

ITEMIZED STATEMENT OF OBLIGATIONS - PAC

1. NAME OF COMMITTEE			2. REPORT COVERING THE PERIOD			
<i>Maintaining Our Majority</i>			FROM <i>4/1/14</i> TO: <i>4/26/14</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		<i>2200⁰⁰</i>	<i>1000⁰⁰</i>	<i>1200⁰⁰</i>	
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
<i>Conquest Communications</i>						
<i>2893 Emerywood Pkwy St. 103</i>						
<i>Richmond</i>	<i>VA</i>	<i>23294</i>				
<i>Surveys</i>						
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 22.b on summary page.)

1200⁰⁰