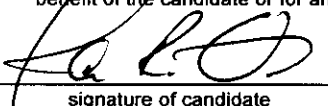
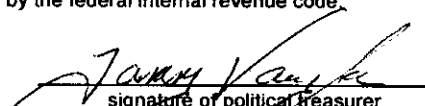
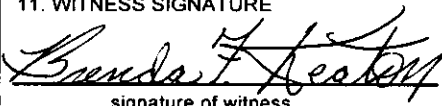
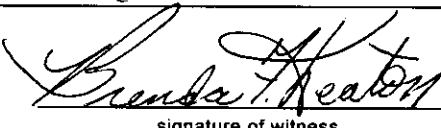


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

FILED
3:46 PM
JAN 29 2014

1. DATE OF REPORT January 29, 2014		2.a. NAME OF CANDIDATE OR COMMITTEE James R. (Jim) Vaughn		SUMNER COUNTY ELECTION COMMISSION	
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE May 6, 2014		
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route	City	State	Zip Code	Phone	
2981 Cages Bend Road	Gallatin	TN	37066	615-973-6813	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)					
Street or Rural Route	City	State	Zip Code	Phone	
5. OFFICE SOUGHT (include district number, if applicable)			6. NAME OF POLITICAL TREASURER (maybe candidate)		
6th County Commissioner			Tammy Vaughn		
7. 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 type="checkbox"/> PRIMARY	<input type="checkbox"/> PRE-GENERAL
			<input type="checkbox"/> MID-YEAR SUPPLEMENTAL	<input checked="" type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD			8.b. ENDING DATE OF REPORTING PERIOD		
July 1, 2013			January 15, 2014		
9. (Check one)					
a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)					
b. <input checked="" type="checkbox"/> This campaign 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.					
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.					
		1-29-2014			
signature of candidate		date		signature of political treasurer	
				1-29-2014	
				date	
11. WITNESS SIGNATURE					
		1-29-2014			
signature of witness		date		signature of witness	
				1-29-2014	
				date	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT			\$ <u>328.46</u>		
b. TOTAL RECEIPTS THIS PERIOD			\$ <u>1400.00</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD			\$ <u>38.50</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)			\$ <u>1689.96</u>		
e. TOTAL LOANS OUTSTANDING			\$ <u>0</u>		
f. TOTAL OBLIGATIONS OUTSTANDING			\$ <u>0</u>		



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE James R. (Jim) Vaughn			2. REPORT COVERING THE PERIOD FROM: 7/1/2013 TO: 1/15/2014	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name Mitch	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Grissim		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address 325 Union Street		<input type="checkbox"/> Runoff (Local Elections Only)		\$250.00
City Nashville	State TN	Zip Code 37201	Date of Contribution	Aggregate This Election
Occupation Attorney			11/25/2013	\$250.00
Employer Mitch Grissim & Associates				
First Name Eben	Middle Name V.	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Appleton		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address 1064 Sunset Drive		<input type="checkbox"/> Runoff (Local Elections Only)		\$50.00
City Gallatin	State TN	Zip Code 37066	Date of Contribution	Aggregate This Election
Occupation			11/23/2013	\$50.00
Employer				
First Name David	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Black		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address 819 Plantation Blvd		<input type="checkbox"/> Runoff (Local Elections Only)		\$1,000.00
City Gallatin	State TN	Zip Code 37066	Date of Contribution	Aggregate This Election
Occupation			11/23/2013	\$1000.00
Employer				
First Name Carl	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Smith		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address 1038 Kendra's Run		<input type="checkbox"/> Runoff (Local Elections Only)		\$100.00
City Gallatin	State TN	Zip Code 37066	Date of Contribution	Aggregate This Election
Occupation			12/24/2013	\$100.00
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.)			\$1,400.00	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE James R. (Jim) Vaughn			2. REPORT COVERING THE PERIOD		
			FROM: 7/1/2013	TO: 1/15/2014	
3. TOTAL ITEMIZED CAMPAIGN 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) 41654					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name Sumner County Election Commission		Voter Information		\$38.50	
Address 355 N. Belvedere Drive, Room 106					
City Gallatin	State TN				Zip Code 37066
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name					
Address *					
City	State				Zip Code
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name					
Address					
City	State				ZIP Code
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name					
Address					
City	State				ZIP Code
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name					
Address					
City	State				ZIP Code
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name					
Address					
City	State				Zip Code
5. TOTAL ITEMIZED EXPENDITURES					Amount
(Carry forward to item 3. of next page if additional pages of this form are used.)				\$38.50	
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					