

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For Multicandidate Committees (PACs)

1. DATE OF REPORT <u>4/10/14</u>	2. NAME OF COMMITTEE <u>STRONG Schools PAC</u>
2.A. SHORT NAME OF COMMITTEE (IF APPLICABLE)	
3. ADDRESS AND PHONE Street or Rural Route      City      State      Zip Code      Phone <u>170-D East Main #166</u> <u>Hendersonville</u> <u>TN</u> <u>37075</u> <u>615-815-4544</u>	
4. TYPE OF CANDIDATES SUPPORTED STATE PUBLIC OFFICE <input type="checkbox"/> LOCAL PUBLIC OFFICE <input checked="" type="checkbox"/> BOTH <input type="checkbox"/>	
5.A. NAME OF POLITICAL TREASURER <u>Keith Dennen</u>	5.B. DATE APPOINTED <u>3/26/14</u>
6. CATEGORY OR REPORT (Check one) <input checked="" type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input 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 <u>1/15/14</u>	7.B. ENDING DATE OF REPORTING PERIOD <u>3/31/14</u>
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 checked="" 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.	
<u>Keith C. Dennen</u> <u>4-9-2014</u> signature of political treasurer      date	
9. WITNESS SIGNATURE  <u>Andy Speers</u> <u>4-9-14</u> signature of witness      date	
10. SUMMARY	
a. BALANCE ON HAND LAST REPORT .....	\$ <u>0</u>
b. TOTAL RECEIPTS THIS PERIOD .....	\$ <u>1500</u>
c. TOTAL DISBURSEMENTS THIS PERIOD .....	\$ <u>0</u>
d. BALANCE ON HAND (10.a. plus 10.b. minus 10.c.) .....	\$ <u>1500</u>
e. TOTAL LOANS OUTSTANDING .....	\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING .....	\$ <u>0</u>

FILED

A.M.      P.M.

APR 09 2014

SUMNER COUNTY  
ELECTION COMMISSION



## SUMMARY PAGE - PAC

11. NAME OF COMMITTEE (In Full) <span style="font-size: 1.2em; font-family: cursive;">STRONG Schools PAC</span>	12. REPORT COVERING THE PERIOD FROM <u>1/15/14</u> TO: <u>3/31/14</u>
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### RECEIPTS

13. CONTRIBUTIONS (other than loans and interest)

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

b. Itemized Contributions (over \$100 from each source this period) ..... \$ 1500

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.) ..... \$ 1500

14. LOANS RECEIVED THIS REPORTING PERIOD ..... \$ 0

15. INTEREST RECEIVED THIS REPORTING PERIOD ..... \$ 0

16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.) ..... \$ 1500

### 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) ..... \$ 0

b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ 0

c. Independent Expenditures ..... \$ 0

d. TOTAL EXPENDITURES (other than loan repayments)(add 17.a., 17.b. and 17.c.) ..... \$ 0

18. LOAN REPAYMENTS MADE THIS PERIOD ..... \$ 0

19. TOTAL DISBURSEMENTS (add 17.d. and 18.) (must be shown in item 10.c.) ..... \$ 0

### 20. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) ..... \$ 0

b. Itemized in-kind contributions (over \$100 from each source this period) ..... \$ 0

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.) ..... \$ 0

### 21. LOANS

LOANS OUTSTANDING (must be shown in item 10.e.) ..... \$ 0

### 22. OBLIGATIONS

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

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

c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown i item 10.f.) ..... \$ 0



## ITEMIZED STATEMENT OF CONTRIBUTIONS - PAC

1. NAME OF COMMITTEE		2. REPORT COVERING THE PERIOD	
STRONG Schools PAC		FROM: 1/15/14	TO: 3/31/14
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 during the period)			
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Katherine		Loveless	\$ 250
Address			
282 Rantree			
City	State	Zip Code	Date of Contribution
Hendersonville	TN	37075	3/31/14
Occupation		Employer	
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
EARL <del>XXXXXXXX</del>		BASS	\$ 250
Address			
105 CARRIAGE LANE			
City	State	Zip Code	Date of Contribution
Hendersonville	TN	37075	3/28/14
Occupation		Employer	
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Keith		Dennen	\$ 250
Address			
135 SARAH TRAIL			
City	State	Zip Code	Date of Contribution
Hendersonville	TN	37075	3/28/14
Occupation		Employer	
A Horney		Dickinson/Wright	
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Zach		Young	\$ 250
Address			
605 NEW HILL LN			
City	State	Zip Code	Date of Contribution
Woodlettsville	TN	37072	3/28/14
Occupation		Employer	
Property Maint			
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Skip		DEAN	\$ 200
Address			
103 Saratoga Blvd.			
City	State	Zip Code	Date of Contribution
Hendersonville	TN	37075	3/28/14
Occupation		Employer	
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Marilyn		Bristol	\$ 200
Address			
119 Ashland Pt.			
City	State	Zip Code	Date of Contribution
Hendersonville	TN	37075	3/26/14
Occupation		Employer	
Real Estate			
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.)			\$ 1400



# ITEMIZED STATEMENT OF CONTRIBUTIONS - PAC

1. NAME OF COMMITTEE <i>STRONG SCHOOLS PAC</i>		2. REPORT COVERING THE PERIOD FROM: <i>1/15/14</i> TO: <i>3/31/14</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>\$1400</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)			
First Name <i>John</i>	M.I.	Last Name/Organization Name <i>Lankford</i>	Amount of Contribution <i>\$100</i>
Address <i>140 Settlers Way</i>			Date of Contribution <i>3/28/14</i>
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	
Occupation		Employer	
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Address			Date of Contribution
City	State	Zip Code	
Occupation		Employer	
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Address			Date of Contribution
City	State	Zip Code	
Occupation		Employer	
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Address			Date of Contribution
City	State	Zip Code	
Occupation		Employer	
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Address			Date of Contribution
City	State	Zip Code	
Occupation		Employer	
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Address			Date of Contribution
City	State	Zip Code	
Occupation		Employer	
5. TOTAL ITEMIZED CONTRIBUTIONS			<i>\$1500</i>
(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.)			

