

SUMMARY PAGE - SMC

11. NAME OF COMMITTEE (In Full) <p style="text-align: center; font-size: 1.2em;">Citizens for Fiscal Sanity</p>	12. REPORT COVERING THE PERIOD <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">FROM: 10/1</td> <td style="width: 50%;">TO: 10/25/2014</td> </tr> </table>	FROM: 10/1	TO: 10/25/2014
FROM: 10/1	TO: 10/25/2014		
RECEIPTS			
13. CONTRIBUTIONS (other than loans and interest)			
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>1,712.00</u>		
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>16,310.00</u>		
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)	\$ <u>18,022.00</u>		
14. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>		
15. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>		
16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.)	\$ <u>18,022.00</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>Parking</u>	\$ <u>5.00</u>		
<u>Service fees</u>	\$ <u>3.79</u>		
<u>Postage</u>	\$ <u>63.45</u>		
<u>Shipping</u>	\$ <u>44.68</u>		
<u>Office supplies</u>	\$ <u>17.47</u>		
.....	\$		
Total of Expenditures (\$100 or less each payee)	\$ <u>\$134.39</u>		
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>\$25,328.71</u>		
c. TOTAL EXPENDITURES (other than loan repayments)(add 17.a. and 17.b.)	\$ <u>\$25,463.10</u>		
18. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>0</u>		
19. TOTAL DISBURSEMENTS (add 17.c. and 18.) (must be shown in item 10.c.)	\$ <u>\$25,463.10</u>		
20. 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 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>\$20,179.10</u>		
c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown in item 10.f.)	\$ <u>\$20,179.10</u>		



ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE		2. REPORT COVERING THE PERIOD		
Citizens for Fiscal Sanity		FROM: 10/1	TO: 10/25/2014	
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	M.I.	Last Name/Organization Name		Amount of Contribution
Mary H. & John K.		Folger		
Address 612 Chelmsford Pl.				
City	State	Zip Code		
Nashville	TN	37215		
Occupation retired				\$200.00
Employer				
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
		Tennesseans for Fair Taxation Action Fund		
Address P. O. Box 68427				
City	State	Zip Code		
Nashville	TN	37206		
Occupation				\$4,060.00
Employer				
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
Molly & Calvin		Miller		
Address 6744 Pennywell Dr				
City	State	Zip Code		
Nashville	TN	37205		
Occupation Professor				\$200.00
Employer Vanderbilt University				
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
		National Education Association		
Address 1201 16th Street, NW				
City	State	Zip Code		
Washington	DC	20036		
Occupation				\$5,000.00
Employer				
First Name	M.I.	Last Name/Organization Name		Amount of Contribution
James		Mills		
Address 29 S. Crest Rd				
City	State	Zip Code		
Chattanooga	TN	37404		
Occupation Manager				\$500.00
Employer Ajax Asset Management				
5. TOTAL ITEMIZED CONTRIBUTIONS			Amount	
(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.)			\$9,960.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE Citizens for Fiscal Sanity		2. REPORT COVERING THE PERIOD FROM: 10/1 TO: 10/25/2014	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$9,960.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)			
First Name Nancy P. & John G.	M.I.	Last Name/Organization Name Stewart	Amount of Contribution \$350.00
Address 6611 Ridge Rock Lane			
City Knoxville	State TN	Zip Code 37909	
Occupation retired			
Employer			
First Name Doug	M.I.	Last Name/Organization Name Horne	Amount of Contribution \$6,000.00
Address 412 N. Cedar Bluff			
City Knoxville	State TN	Zip Code 37923	
Occupation President			
Employer Horne Properties			
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Address			
City	State	Zip Code	
Occupation			
Employer			
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Address			
City	State	Zip Code	
Occupation			
Employer			
First Name	M.I.	Last Name/Organization Name	Amount of Contribution
Address			
City	State	Zip Code	
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.)			\$16,310



ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE Citizens for Fiscal Sanity		2. REPORT COVERING THE PERIOD	
		FROM: 10/1	TO: 10/25/2014
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (any expenditures totaling more than \$100 to a single payee during the period, must be itemized.)			
First Name Ashley	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Dwire		Campaign Coordinator	\$3,200.00
Address 2731 Roscommon Dr			
City Murfreesboro	State TN		
First Name Brian	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Miller		Strategy Consultant	\$2,820.00
Address 26 Hillcrest Rd			
City Waltham	State MA		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Amplify, Inc.		Communications Consulting	\$5,000.00
Address 59 Lincoln Park, Suite 220			
City Newark	State NJ		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Winning Connections		Telephone Town Hall	\$8,612.60
Address 317 Pennsylvania Ave., SE 2nd Floor			
City Washington	State DC		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name American Press & Label		Signs	\$4,850.71
Address 2410 Cruzen Street			
City Nashville	State TN		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name The UPS Store		Printing handouts	\$701.31
Address 2441-Q Old Fort Parkway			
City Murfreesboro	State TN		
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.)			\$25,184.62

ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE Citizens for Fiscal Sanity		2. REPORT COVERING THE PERIOD		
		FROM: 10/1	TO: 10/25/2014	
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$25,184.62	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (any expenditures totaling more than \$100 to a single payee during the period, must be itemized.)				
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name FedEx Office		Printing	\$144.09	
Address 207 Stones River Mall Blvd.				
City Murfreesboro	State TN			Zip Code 37129
First Name	Middle Name			Purpose 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		
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 campaign expenditures, this amount must be shown in Item 17b. of summary.)			\$25,328.71	

ITEMIZED STATEMENT OF OBLIGATIONS - SMC

1. NAME OF COMMITTEE				2. REPORT COVERING THE PERIOD			
Citizens for Fiscal Sanity				FROM: 10/1		TO: 10/25/2014	
				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)			
First Name	Middle Name			\$2,820.00	\$10,673.39	\$2,820.00	\$10,673.39
Brian							
Last Name/Business Name							
Miller							
Address							
26 Hillcrest Rd.							
City	State	Zip Code					
Waltham	MA	02451					
Description of Obligation							
First Name	Middle Name			\$8,612.60	0	\$8,612.60	0
Last Name/Business Name							
Winning Connections							
Address							
317 Pennsylvania Ave., SE 2nd Floor							
City	State	Zip Code					
Washington	DC	20003					
Description of Obligation							
First Name	Middle Name			\$5,000.00	0	\$5,000.00	0
Last Name/Business Name							
Amplify, Inc.							
Address							
59 Lincoln Park, Suite 220							
City	State	Zip Code					
Newark	NJ	07102					
Description of Obligation							
First Name	Middle Name			\$673.00	\$2,000.00	0	\$2,673.00
William	W.						
Last Name/Business Name							
Howell							
Address							
1701 Sweetbriar Ave.							
City	State	Zip Code					
Nashville	TN	37212					
Description of Obligation							
Administration							
First Name	Middle Name			\$1,600.00	\$2,400.00	\$3,200.00	\$800.00
Ashley							
Last Name/Business Name							
Dwire							
Address							
2731 Roscommon Dr.							
City	State	Zip Code					
Murfreesboro	TN	37128					
Description of Obligation							
Campaign Coordinator							
4. TOTALS				\$18,705.60	\$15,073.39	\$19,632.60	\$14,146.39
(Total from "Outstanding Balance - (End of Period)" column must also be shown in Item 22.b on summary page.)							

From previous page

\$18,705.60 \$15,073.39 \$19,632.60 \$14,146.39

ITEMIZED STATEMENT OF OBLIGATIONS - SMC

1. NAME OF COMMITTEE				2. REPORT COVERING THE PERIOD			
Citizens for Fiscal Sanity				FROM: 10/1		TO: 10/25/2014	
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			\$0	\$1,600.00	\$0	\$1,600.00
Last Name/Business Name Printing, Etc.							
Address 1100 Menzler Lane							
City Nashville	State TN	Zip Code 37210					
Description of Obligation Printing/mailing							
First Name	Middle Name			\$0	\$4,432.71	\$0	\$4,432.71
Last Name/Business Name Tennessee Education Association							
Address 801 2nd Ave N,							
City Nashville	State TN	Zip Code 37201					
Description of Obligation robocalls							
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				\$18,705.60	\$21,106.10	\$19,632.60	\$20,179.10
(Total from "Outstanding Balance - (End of Period)" column must also be shown in Item 22.b on summary page.)							