

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4-7-2014</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Mark Gammon</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Mark Gammon</u>		3. ELECTION DATE <u>Aug 7 2014</u>	
4.a. CAMPAIGN ADDRESS AND PHONE <div style="display: flex; justify-content: space-between;"> <span>Street or Rural Route</span> <span>City</span> <span>State</span> <span>Zip Code</span> <span>Phone</span> </div> <u>714 Old Hwy 52 West Lafayette TN 37083 633-6351</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) <div style="display: flex; justify-content: space-between;"> <span>Street or Rural Route</span> <span>City</span> <span>State</span> <span>Zip Code</span> <span>Phone</span> </div>			
5. OFFICE SOUGHT (include district number, if applicable) <u>Sheriff</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Same</u>	
7. CATEGORY OF REPORT (Check one) <div style="display: flex; justify-content: space-around; font-size: small;"> <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           </div>			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>1-16-2014</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>3-31-2014</u>	
9. (Check one) a. <input checked="" 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 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. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> <u></u>              signature of candidate           </div> <div style="text-align: center;"> <u>4-16-2014</u>              date           </div> <div style="text-align: center;"> <u>Same</u>              signature of political treasurer           </div> <div style="text-align: center;">               date           </div> </div>			
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> <u></u>              signature of witness           </div> <div style="text-align: center;"> <u>4-16-14</u>              date           </div> <div style="text-align: center;"> <u></u>              signature of witness           </div> <div style="text-align: center;"> <u>4-16-14</u>              date           </div> </div>			
12. SUMMARY <div style="text-align: center; font-size: 2em; font-weight: bold; margin: 10px 0;">RECEIVED</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">           a. BALANCE ON HAND LAST REPORT .....            b. TOTAL RECEIPTS THIS PERIOD .....            c. TOTAL DISBURSEMENTS THIS PERIOD .....            d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....            e. TOTAL LOANS OUTSTANDING .....            f. TOTAL OBLIGATIONS OUTSTANDING .....         </div> <div style="width: 35%; text-align: right;"> <div style="margin-bottom: 10px;">APR 07 2014</div> <div style="margin-bottom: 10px;">MACON COUNTY ELECTION COMMISSION</div> <div style="margin-bottom: 10px;">\$ <u>0</u></div> <div style="margin-bottom: 10px;">\$ <u>570<sup>25</sup></u></div> <div style="margin-bottom: 10px;">\$ <u>570<sup>25</sup></u></div> <div style="margin-bottom: 10px;">\$ <u>0</u></div> <div style="margin-bottom: 10px;">\$ <u>0</u></div> <div style="margin-bottom: 10px;">\$ <u>0</u></div> </div> </div>			



## SUMMARY PAGE - CANDIDATE

<b>13. NAME OF CANDIDATE OR COMMITTEE (In Full)</b>	<b>14. REPORT COVERING THE PERIOD</b> FROM: _____ TO: _____	
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**RECEIPTS**

**15. 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) ..... \$ \_\_\_\_\_

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ \_\_\_\_\_

**16. LOANS RECEIVED THIS REPORTING PERIOD** to my self ..... \$ 570<sup>25</sup>

**17. INTEREST RECEIVED THIS REPORTING PERIOD** ..... \$ \_\_\_\_\_

**18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)** ..... \$ \_\_\_\_\_

  
**DISBURSEMENTS**

**19. EXPENDITURES (other than loan payments)**

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

<u>Ads</u>	\$ <u>200</u>
<u>Signs</u>	\$ <u>190</u>
<u>bats</u>	\$ <u>180<sup>25</sup></u>
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____

Total of Expenditures (\$100 or less each payee) ..... \$ 570<sup>25</sup>

b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ 570<sup>25</sup>

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ 570<sup>25</sup>

**20. LOAN REPAYMENTS MADE THIS PERIOD** ..... \$ \_\_\_\_\_

**21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)** ..... \$ \_\_\_\_\_

  
**22. 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 22.a. and 22.b.) ..... \$ \_\_\_\_\_

  
**23. OBLIGATIONS**

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

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

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) ..... \$ \_\_\_\_\_



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4-29-2014</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Mark Gammons</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Same</u>		3. ELECTION DATE <u>Aug 7 2014</u>	
4.a. CAMPAIGN ADDRESS AND PHONE <div style="display: flex; justify-content: space-between;"> <span>Street or Rural Route</span> <span>City</span> <span>State</span> <span>Zip Code</span> <span>Phone</span> </div> <u>714 Old Hwy 52 W Lafayette TN 37087 615-688-4633</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) <div style="display: flex; justify-content: space-between;"> <span>Street or Rural Route</span> <span>City</span> <span>State</span> <span>Zip Code</span> <span>Phone</span> </div> <u>Same</u>			
5. OFFICE SOUGHT (include district number, if applicable) <u>Sheriff</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Same</u>	
7. CATEGORY OR REPORT (Check one) <div style="display: flex; justify-content: space-around; font-size: small;"> <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           </div>			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>4-1-2014</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>4-26-2014</u>	
9. (Check one) a. <input checked="" 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 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. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> <u>Mark Gammons</u> signature of candidate         </div> <div style="text-align: center;"> <u>4-29-2014</u> date         </div> <div style="text-align: center;"> <u>Same</u> signature of political treasurer         </div> <div style="text-align: center;">  date         </div> </div>			
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> <u>Benny Weber</u> signature of witness         </div> <div style="text-align: center;"> <u>4-29-2014</u> date         </div> <div style="text-align: center;">  signature of witness         </div> <div style="text-align: center;">  date         </div> </div>			
12. SUMMARY <div style="text-align: center; margin: 10px 0;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;">RECEIVED</div> <div style="margin-left: 10px;">APR 30 2014</div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;">           a. BALANCE ON HAND LAST REPORT .....            b. TOTAL RECEIPTS THIS PERIOD .....            c. TOTAL DISBURSEMENTS THIS PERIOD .....            d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....            e. TOTAL LOANS OUTSTANDING .....            f. TOTAL OBLIGATIONS OUTSTANDING .....         </div> <div style="width: 35%; text-align: right;"> <div style="margin-bottom: 10px;"> <u>0</u> \$         </div> <div style="margin-bottom: 10px;"> <u>4112.50</u> \$         </div> <div style="margin-bottom: 10px;"> <u>4112.50</u> \$         </div> <div style="margin-bottom: 10px;"> <u>0</u> \$         </div> <div style="margin-bottom: 10px;"> <u>0</u> \$         </div> <div style="margin-bottom: 10px;"> <u>0</u> \$         </div> </div> </div>			



## SUMMARY PAGE - CANDIDATE

<b>13. NAME OF CANDIDATE OR COMMITTEE (In Full)</b>	<b>14. REPORT COVERING THE PERIOD</b> FROM: _____ TO: _____	
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**RECEIPTS**  
**15. 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) ..... \$ \_\_\_\_\_  
 c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ \_\_\_\_\_  
**16. LOANS RECEIVED THIS REPORTING PERIOD** to myself ..... \$ 4750  
**17. INTEREST RECEIVED THIS REPORTING PERIOD** ..... \$ \_\_\_\_\_  
**18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)** ..... \$ \_\_\_\_\_

**DISBURSEMENTS**  
**19. EXPENDITURES (other than loan payments)**  
 a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)  

<u>hats</u>	\$ <u>212<sup>50</sup></u>
<u>signs</u>	\$ <u>200<sup>00</sup></u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

  
 Total of Expenditures (\$100 or less each payee) ..... \$ \_\_\_\_\_  
 b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ 412<sup>50</sup>  
 c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ 412<sup>50</sup>  
**20. LOAN REPAYMENTS MADE THIS PERIOD** ..... \$ \_\_\_\_\_  
**21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)** ..... \$ \_\_\_\_\_

**22. 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 22.a. and 22.b.) ..... \$ \_\_\_\_\_

**23. OBLIGATIONS**  
 a. Unitemized Obligations Outstanding (\$100 or less each) ..... \$ \_\_\_\_\_  
 b. Itemized Obligations Outstanding (Over \$100 each) ..... \$ \_\_\_\_\_  
 c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) ..... \$ \_\_\_\_\_



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
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		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
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.)					



# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
		Description of In-Kind Contribution			
Occupation					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
		Description of In-Kind Contribution			
Occupation					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
		Description of In-Kind Contribution			
Occupation					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
		Description of In-Kind Contribution			
Occupation					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
		Description of In-Kind Contribution			
Occupation					
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS					
(Carry forward to item 3. of next page if additional pages of this form are used.)					
(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)					



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD	
			FROM:	TO:
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)				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
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 expenditures, this amount must be shown in item 19b. of summary.)				



## ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD		
					FROM:	TO:	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name	Middle Name	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)		
Last Name/Organization Name							
Address		Loan Received For:			Date of Loan		
		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election					
City	State	Zip Code	<input type="checkbox"/> Runoff (Local Elections Only)				
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)							
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code		City		State
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code		City		State
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code		City		State
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code		City		State
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding					
4. Totals for all Loans (complete on last page of itemized loans)							
(Total loans received should also be shown in item 16, on summary page.)			Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
(Total loan payments should also be shown in item 20, on summary page.)							
(Total outstanding loan balance should also be shown in item 12.e. on front page.)							





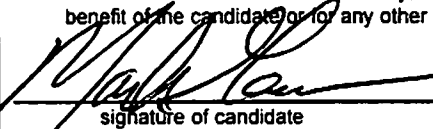
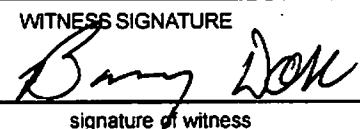
## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
				FROM:		TO:	
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					
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 23b. on summary page.)							



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <b>7-10-14</b>		2.a NAME OF CANDIDATE OR COMMITTEE <b>Mark Gammours</b>													
2.b. IF COMMITTEE, NAME OF CANDIDATE <b>Mark Gammours</b>		3. ELECTION DATE <b>8-7-14</b>													
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <b>714 Old Hwy 52w Lafayette TN 37083 615-666-3325</b>															
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <b>Same</b>															
5. OFFICE SOUGHT (include district number, if applicable) <b>Sheriff</b>		6. NAME OF POLITICAL TREASURER (may be candidate) <b>Same</b>													
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input checked="" type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL															
8.a. BEGINNING DATE OF REPORTING PERIOD <b>7-1-14 4-27-14</b>		8.b. ENDING DATE OF REPORTING PERIOD <b>7-28-2014 6-30-14</b>													
9. (Check one) a. <input checked="" 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 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. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>             signature of candidate         </div> <div> <b>7-10-14</b>            date         </div> <div> <b>Same</b>            signature of political treasurer         </div> <div>           _____            date         </div> </div>															
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>             signature of witness         </div> <div> <b>7-10-14</b>            date         </div> <div>           _____            signature of witness         </div> <div>           _____            date         </div> </div>															
12. SUMMARY <div style="text-align: center; margin: 10px 0;"> <b>RECEIVED</b>  <b>JUL 10 2014 8:30 AM</b>  <b>BO</b>  <b>MACON COUNTY</b>  <b>ELECTION COMMISSION</b> </div> <table style="width: 100%;"> <tr> <td>a. BALANCE ON HAND LAST REPORT .....</td> <td style="text-align: right;">\$ <u>0</u></td> </tr> <tr> <td>b. TOTAL RECEIPTS THIS PERIOD .....</td> <td style="text-align: right;">\$ <u>4,405.00</u></td> </tr> <tr> <td>c. TOTAL DISBURSEMENTS THIS PERIOD .....</td> <td style="text-align: right;">\$ <u>4,405.00</u></td> </tr> <tr> <td>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....</td> <td style="text-align: right;">\$ <u>0</u></td> </tr> <tr> <td>e. TOTAL LOANS OUTSTANDING .....</td> <td style="text-align: right;">\$ <u>0</u></td> </tr> <tr> <td>f. TOTAL OBLIGATIONS OUTSTANDING .....</td> <td style="text-align: right;">\$ <u>0</u></td> </tr> </table>				a. BALANCE ON HAND LAST REPORT .....	\$ <u>0</u>	b. TOTAL RECEIPTS THIS PERIOD .....	\$ <u>4,405.00</u>	c. TOTAL DISBURSEMENTS THIS PERIOD .....	\$ <u>4,405.00</u>	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....	\$ <u>0</u>	e. TOTAL LOANS OUTSTANDING .....	\$ <u>0</u>	f. TOTAL OBLIGATIONS OUTSTANDING .....	\$ <u>0</u>
a. BALANCE ON HAND LAST REPORT .....	\$ <u>0</u>														
b. TOTAL RECEIPTS THIS PERIOD .....	\$ <u>4,405.00</u>														
c. TOTAL DISBURSEMENTS THIS PERIOD .....	\$ <u>4,405.00</u>														
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....	\$ <u>0</u>														
e. TOTAL LOANS OUTSTANDING .....	\$ <u>0</u>														
f. TOTAL OBLIGATIONS OUTSTANDING .....	\$ <u>0</u>														



## SUMMARY PAGE - CANDIDATE

<b>13. NAME OF CANDIDATE OR COMMITTEE (In Full)</b>	<b>14. REPORT COVERING THE PERIOD</b> FROM: _____ TO: _____	
---	--	--

  
**RECEIPTS**

**15. CONTRIBUTIONS (other than loans and interest)**

a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 0

b. Itemized Contributions (over \$100 from each source this period) ..... \$ 0

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ 0

**16. LOANS RECEIVED THIS REPORTING PERIOD** ..... \$ 0

**17. INTEREST RECEIVED THIS REPORTING PERIOD** ..... \$ 0

**18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)** ..... \$ \_\_\_\_\_

  
**DISBURSEMENTS**

**19. EXPENDITURES (other than loan payments)**

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

<u>Signs</u>	\$ <u>1,465<sup>00</sup></u>
<u>advertisement</u>	\$ <u>2,960<sup>00</sup></u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

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

b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ 4,425<sup>00</sup>

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ 0

**20. LOAN REPAYMENTS MADE THIS PERIOD** ..... \$ 0

**21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)** ..... \$ \_\_\_\_\_

  
**22. 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 22.a. and 22.b.) ..... \$ \_\_\_\_\_

  
**23. OBLIGATIONS**

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

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

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) ..... \$ \_\_\_\_\_



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
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		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
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.)					



# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State		Zip Code	
Occupation		Employer			
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State		Zip Code	
Occupation		Employer			
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State		Zip Code	
Occupation		Employer			
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State		Zip Code	
Occupation		Employer			
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State		Zip Code	
Occupation		Employer			
Description of In-Kind Contribution					
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS					
(Carry forward to item 3. of next page if additional pages of this form are used.)					
(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)					



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
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)						
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				
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 expenditures, this amount must be shown in item 19b. of summary.)						



## ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD														
					FROM:	TO:													
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)																			
Complete the Following for the Source of the Loan																			
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Outstanding Loan Balance (End of Period)													
Last Name/Organization Name				Loans Received		Loan Payments													
Address				Loan Received For:			Date of Loan												
City				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)															
State				Zip Code															
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)																			
First Name			Middle Name			First Name			Middle Name										
Last Name/Organization Name						Last Name/Organization Name													
Address						Address													
City			State			Zip Code			City			State			Zip Code				
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding													
First Name			Middle Name			First Name			Middle Name										
Last Name/Organization Name						Last Name/Organization Name													
Address						Address													
City			State			Zip Code			City			State			Zip Code				
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding													
First Name			Middle Name			First Name			Middle Name										
Last Name/Organization Name						Last Name/Organization Name													
Address						Address													
City			State			Zip Code			City			State			Zip Code				
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding													
First Name			Middle Name			First Name			Middle Name										
Last Name/Organization Name						Last Name/Organization Name													
Address						Address													
City			State			Zip Code			City			State			Zip Code				
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding													
4. Totals for all Loans (complete on last page of itemized loans)												Outstanding Loan Balance (Beginning of Period)		Loans Received		Loan Payments		Outstanding Loan Balance (End of Period)	
(Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)																			



## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

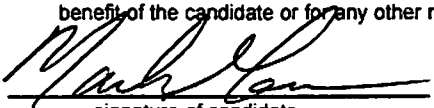
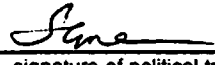
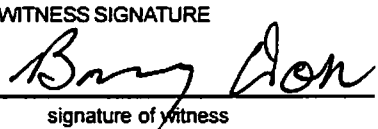

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
			FROM:		TO:	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name				
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 23b. on summary page.)						





# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <b>7-31-2014</b>		2.a. NAME OF CANDIDATE OR COMMITTEE <b>Mark Gammon</b>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <b>Same</b>		3. ELECTION DATE <b>8-7-2014</b>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route <b>714 Old Hwy 52 W</b> City <b>Lafayette</b> State <b>TX</b> Zip Code <b>77083</b> Phone <b>615-633-6351</b>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route <b>Same</b> City _____ State _____ Zip Code _____ Phone _____			
5. OFFICE Sought (include district number, if applicable) <b>Sen. RV</b>		6. NAME OF POLITICAL TREASURER (may be candidate)	
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"/> PRE-PRIMARY <input checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <b>7-1-2014</b>		8.b. ENDING DATE OF REPORTING PERIOD <b>7-28-2014</b>	
9. (Check one) a. <input checked="" 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 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. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">                           signature of candidate                     </div> <div style="text-align: center;"> <b>7-31-2014</b>                          date                     </div> <div style="text-align: center;">                           signature of political treasurer                     </div> <div style="text-align: center;">                           date                     </div> </div>			
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">                           signature of witness                     </div> <div style="text-align: center;"> <b>7-31-14</b>                          date                     </div> <div style="text-align: center;">                           signature of witness                     </div> <div style="text-align: center;"> <b>7-31-14</b>                          date                     </div> </div>			
12. SUMMARY			
RECEIVED			
a. BALANCE ON HAND LAST REPORT ..... <b>JUL 31 2014</b> <b>BD</b> ..... \$ <b>0</b>			
b. TOTAL RECEIPTS THIS PERIOD ..... <b>8:43 AM</b> ..... \$ <b>946.50</b>			
c. TOTAL DISBURSEMENTS THIS PERIOD ..... <b>MACON COUNTY ELECTION COMMISSION</b> ..... \$ <b>946.50</b>			
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) ..... \$ <b>0</b>			
e. TOTAL LOANS OUTSTANDING ..... \$ <b>0</b>			
f. TOTAL OBLIGATIONS OUTSTANDING ..... \$ <b>0</b>			



## SUMMARY PAGE - CANDIDATE

<b>13. NAME OF CANDIDATE OR COMMITTEE (In Full)</b>	<b>14. REPORT COVERING THE PERIOD</b> FROM: _____ TO: _____	
---	--	--

**RECEIPTS**  
**15. CONTRIBUTIONS (other than loans and interest)**  
 a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 0  
 b. Itemized Contributions (over \$100 from each source this period) ..... \$ 0  
 c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ 0  
**16. LOANS RECEIVED THIS REPORTING PERIOD** ..... \$ 0  
**17. INTEREST RECEIVED THIS REPORTING PERIOD** ..... \$ 0  
**18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)** ..... \$ 0

**DISBURSEMENTS**  
**19. EXPENDITURES (other than loan payments)**  
 a. 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) ..... \$ \_\_\_\_\_  
 c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ \_\_\_\_\_  
**20. LOAN REPAYMENTS MADE THIS PERIOD** ..... \$ \_\_\_\_\_  
**21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)** ..... \$ \_\_\_\_\_

**22. 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 22.a. and 22.b.) ..... \$ \_\_\_\_\_

**23. OBLIGATIONS**  
 a. Unitemized Obligations Outstanding (\$100 or less each) ..... \$ \_\_\_\_\_  
 b. Itemized Obligations Outstanding (Over \$100 each) ..... \$ \_\_\_\_\_  
 c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) ..... \$ \_\_\_\_\_



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
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		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
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 15b. of summary.)						



# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)					
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
Occupation		Employer			
				Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
Occupation		Employer			
				Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
Occupation		Employer			
				Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
Occupation		Employer			
				Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	
				Aggregate this Election	
City		State	Zip Code		
Occupation		Employer			
				Description of In-Kind Contribution	
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS					
(Carry forward to item 3. of next page if additional pages of this form are used.)					
(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)					



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
				Amount		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)						
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)						
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				
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 expenditures, this amount must be shown in item 19b. of summary.)						



## ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD	
					FROM:	TO:
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)						
Complete the Following for the Source of the Loan						
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received
Last Name/Organization Name				Loan Payments		Outstanding Loan Balance (End of Period)
Address				Loan Received For:		Date of Loan
City		State	Zip Code	<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)						
First Name		Middle Name		First Name		Middle Name
Last Name/Organization Name				Last Name/Organization Name		
Address				Address		
City		State	Zip Code	City		State
City		State	Zip Code	City		State
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding		
First Name		Middle Name		First Name		Middle Name
Last Name/Organization Name				Last Name/Organization Name		
Address				Address		
City		State	Zip Code	City		State
City		State	Zip Code	City		State
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding		
First Name		Middle Name		First Name		Middle Name
Last Name/Organization Name				Last Name/Organization Name		
Address				Address		
City		State	Zip Code	City		State
City		State	Zip Code	City		State
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding		
First Name		Middle Name		First Name		Middle Name
Last Name/Organization Name				Last Name/Organization Name		
Address				Address		
City		State	Zip Code	City		State
City		State	Zip Code	City		State
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding		
4. Totals for all Loans (complete on last page of itemized loans)				Outstanding Loan Balance (Beginning of Period)		Loans Received
(Total loans received should also be shown in item 16, on summary page.) (Total loan payments should also be shown in item 20, on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)						



## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
				FROM:		TO:	
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					
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 23b. on summary page.)							

