CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For Single-Measure Committees (SMC)

1. DATE OF REPORT
   10/09/14

2. NAME OF COMMITTEE
   FACT for 1

3. ADDRESS AND PHONE
   Street or Rural Route: 1113 Murfreesboro RD, STE 106-167
   City: Franklin
   State: TN
   Zip Code: 37064
   Phone: (615) 591-2090

4. MEASURES SUPPORTED OR OPPOSED
   Amendment 1, November 2014

5.A. NAME OF POLITICAL TREASURER
   David Fowler

5.B. DATE APPOINTED
   09/23/14

6. CATEGORY OR REPORT (Check one)
   ☒ Fourth Quarter
   ☐ First Quarter
   ☐ Second Quarter
   ☐ Third Quarter
   ☐ Pre-Primary
   ☐ Pre-General
   ☐ Mid-Year Supplemental
   ☐ Year-End Supplemental

7.A. BEGINNING DATE OF REPORTING PERIOD
   07/01/14

7.B. ENDING DATE OF REPORTING PERIOD
   09/30/14

8. (Check one)
   A. ☐ 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. ☒ 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.

   signature of political treasurer

   10/9/14

9. WITNESS SIGNATURE
   signature of witness

   10/9/14

10. SUMMARY
   a. BALANCE ON HAND LAST REPORT .......................................................... $ 0
   b. TOTAL RECEIPTS THIS PERIOD .......................................................... $ 0
   c. TOTAL DISBURSEMENTS THIS PERIOD .................................................. $ 0
   d. BALANCE ON HAND (10a. plus 10b. minus 10c.) .................................. $ 0
   e. TOTAL LOANS OUTSTANDING .............................................................. $ 0
   f. TOTAL OBLIGATIONS OUTSTANDING ................................................... $ 0

SS-1140 (Rev. 2/06)
RDA 1159
### RECEIPTS

13. 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 13.a. and 13.b.) ........................................... $ 0

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.) ........................................... $ 0

### 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. TOTAL EXPENDITURES (other than loan repayments)(add 17.a. and 17.b.) ...................................... $ 0

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

19. TOTAL DISBURSEMENTS (add 17.c. 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) ................................. $ 13,543.73
- c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.) ................. $ 13,543.73

### 21. LOANS

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

### 22. OBLIGATIONS

- a. Unitemized Obligations Outstanding ($100 or less each) ............................................................. $ 0
- b. Itemized Obligations Outstanding (Over $100 each) .................................................................... $ 0
- c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown in item 10.f.) ....... $ 0
ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE FACT for 1

2. REPORT COVERING THE PERIOD
   FROM: 07/31/14 TO: 09/30/14

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 | M.I. | Last Name/Organization Name | Amount of Contribution |
---|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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.)

   $0
ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE          FACT for 1

2. REPORT COVERING THE PERIOD
   FROM: 7/01/14   TO: 09/30/14
   Amount: $0

3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter $0 if first itemized page)

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.)

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Purpose of Expenditure</th>
<th>Amount of Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Name/Business Name</td>
<td>Address</td>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>First Name</td>
<td>Middle Name</td>
<td>Purpose of Expenditure</td>
<td>Amount of Expenditure</td>
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<tr>
<td>Last Name/Business Name</td>
<td>Address</td>
<td>City</td>
<td>State</td>
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<td>Middle Name</td>
<td>Purpose of Expenditure</td>
<td>Amount of Expenditure</td>
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<td>Purpose of Expenditure</td>
<td>Amount of Expenditure</td>
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<td>Last Name/Business Name</td>
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<td>First Name</td>
<td>Middle Name</td>
<td>Purpose of Expenditure</td>
<td>Amount of Expenditure</td>
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<tr>
<td>Last Name/Business Name</td>
<td>Address</td>
<td>City</td>
<td>State</td>
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</tbody>
</table>

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.)

   $0

RDA 1159

Page 4 of 7
## ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - SMC

### 1. NAME OF COMMITTEE
- **FACT for 1**

### 2. REPORT COVERING PERIOD
- FROM: 07/01/14
- TO: 09/30/14
- **Amount $0**

### 3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter $0 if first itemized page)

### 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than $100 from any contributor during the period)

<table>
<thead>
<tr>
<th>Description of In-Kind Contribution</th>
<th>Value of In-Kind Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Services</td>
<td>$9,569.84</td>
</tr>
<tr>
<td>Expenses incurred in support of Amendment 1 for travel-related costs for employees to attend and speak at engagements and events; hosting &quot;An Evening with Abby Johnson&quot;; facility fees; table sponsorship; and printing, copying and graphical design costs for materials.</td>
<td>$3,973.89</td>
</tr>
</tbody>
</table>

### 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 20.b. of summary.

- **$13,543.73**
# Itemized Statement of Loans - SMC

1. **NAME OF COMMITTEE**  
   FACT for 1

2. **REPORT COVERING THE PERIOD**  
   FROM: 07/01/14  
   TO: 09/30/14

3. **COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN** (loans totaling more than $100 owed to any person/business at the end of the reporting period)

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Outstanding Balance (Beginning of Period)</th>
<th>Loans Received This Period</th>
<th>Loan Payments This Period</th>
<th>Outstanding Balance (End of Period)</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name</td>
<td>Middle Name</td>
<td>Date of Loan</td>
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<td></td>
</tr>
<tr>
<td>Last Name/\Business Name</td>
<td>//Address</td>
<td>City</td>
<td>State</td>
<td>Zip Code</td>
<td>Date of Loan</td>
</tr>
</tbody>
</table>

4. **TOTALS**  
(Total from "Outstanding Balance - (End of Period)" column must also be shown in Item 21 on summary page.)

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SS-1146 (Rev. 4/02)  
Page 6 of 7  
RDA 1159
### ITEMIZED STATEMENT OF OBLIGATIONS - SMC

1. **NAME OF COMMITTEE**     **FACT for 1**

2. **REPORT COVERING THE PERIOD**
   - **FROM: 07/01/14**
   - **TO: 09/30/14**

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)

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name/Business Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Description of Obligation</th>
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<th>Outstanding Balance (Beginning of Period)</th>
<th>Debt Incurred This Period</th>
<th>Payments This Period</th>
<th>Outstanding Balance (End of Period)</th>
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</table>

4. **TOTALS**

   (Total from "Outstanding Balance - (End of Period)" column must also be shown in Item 2 of summary page.)

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SS-1144 (Rev. 04/02)