

SUMMARY PAGE - SMC

11. NAME OF COMMITTEE (In Full) UNITED TENNESSEE YES ON 3	12. REPORT COVERING THE PERIOD FROM: OCT 1 TO: OCT 29
RECEIPTS	
13. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>495.77</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>19200.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)	\$ _____
14. LOANS RECEIVED THIS REPORTING PERIOD	
15. INTEREST RECEIVED THIS REPORTING PERIOD	
16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.)	
	\$ <u>19695.77</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)	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
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 17.a. and 17.b.)	
	\$ <u>57836.55</u>
18. LOAN REPAYMENTS MADE THIS PERIOD	
19. TOTAL DISBURSEMENTS (add 17.c. and 18.) (must be shown in item 10.c.)	
	\$ <u>57836.55</u>
20. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each ^{Text} 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.)	
	\$ _____
21. LOANS	
LOANS OUTSTANDING (must be shown in item 10.e.)	
	\$ _____
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.)	
	\$ _____



ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE UNITED TENNESSEE YES ON 3			2. REPORT COVERING THE PERIOD	
			FROM: OCT 1	TO: OCT 29
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
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				
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				\$6350.00
(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.)				



ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE UNITED TENNESSEE YES ON 3		2. REPORT COVERING THE PERIOD	
		FROM: OCT 1	TO: OCT 29
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$6350.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)			
First Name TOM	M.I.	Last Name/Organization Name LEE	Amount of Contribution \$1000.00
Address 763 MILL CREEK MEADOW DRIVE			
City NASHVILLE	State TN	Zip Code 37214	
Occupation BEST EFFORT			
Employer BEST EFFORT			
First Name YUSUF	M.I.	Last Name/Organization Name HAKHEEM	Amount of Contribution \$300.00
Address JOHN LEWIS Way N. · SUITE 524 CORDELL HULL BLDG.			
City NASHVILLE	State TN	Zip Code 37243	
Occupation STATE REPRESENTATIVE			
Employer TENNESSEE STATE LEGISLATURE			
First Name	M.I.	Last Name/Organization Name DAVIDSON COUNTY DEMOCRATIC WOMEN	Amount of Contribution \$500.00
Address P.O. BOX 330154			
City NASHVILLE	State TN	Zip Code 37202	
Occupation			
Employer			
First Name ERNIE	M.I.	Last Name/Organization Name HOSKINS	Amount of Contribution \$100.00
Address 1111 SHADYLAND DRIVE			
City KNOXVILLE	State TN	Zip Code 37919	
Occupation PREVENTION DIRECTOR			
Employer CDC			
First Name KATHY	M.I.	Last Name/Organization Name OLSEN	Amount of Contribution \$5000.00
Address SUNNYBROOK DRIVE			
City NASHVILLE	State TN	Zip Code 37205	
Occupation RETIRED			
Employer RETIRED			
5. TOTAL ITEMIZED CONTRIBUTIONS			\$13250.00
(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.)			



ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE UNITED TENNESSEE YES ON 3			2. REPORT COVERING THE PERIOD FROM: OCT 1 TO: OCT 29	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$13250.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)				
First Name CHRIS	M.I.	Last Name/Organization Name UHDE		Amount of Contribution \$100.00
Address				
City NASHVILLE	State TN	Zip Code 37205		
Occupation REALTOR				
Employer INERTIA REALTY				
First Name ANDREW	M.I.	Last Name/Organization Name HERRINGTON		Amount of Contribution \$100.00
Address 1806 RIVERSIDE DRIVE				
City OLD HICKORY	State TN	Zip Code 37138		
Occupation SENIOR ASSOCIATE				
Employer KPMG				
First Name	M.I.	Last Name/Organization Name NIKE		Amount of Contribution \$5000.00
Address ONE BOWERMAN DR				
City BEAVERTON	State OR	Zip Code 97005		
Occupation				
Employer				
First Name	M.I.	Last Name/Organization Name TENNESSEE BUSINESS ROUNDTABLE		Amount of Contribution \$500.00
Address 640 SPENCE LN, SUITE 250				
City NASHVILLE	State TN	Zip Code 37217		
Occupation PRO BUSINESS ADVOCATE				
Employer				
First Name	M.I.	Last Name/Organization Name WILLIAMSON COUNTY DEMOCRATIC PARTY		Amount of Contribution 250.00
Address 4125 MIRASSOU COURT				
City FRANKLIN	State TN	Zip Code 37067		
Occupation COUNTY PARTY				
Employer				
5. TOTAL ITEMIZED CONTRIBUTIONS				\$19200.00
(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.)				



ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE UNITED TENNESSEE YES ON 3			2. REPORT COVERING THE PERIOD		
			FROM: OCT 1	TO: OCT 29	
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	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name FACEBOOK		DIGITAL ADVERTISING		\$169.39	
Address 1601 WILLOW RD					
City MENLO PARK	State CA				Zip Code 91122
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name STRIPE		FUNDRAISING FEES		\$326.20	
Address 185 BERRY ST SUITE 550					
City SAN FRANCISCO	State CA				Zip Code 94107
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name PATTON		STAFF/ CONSULTING		\$11750.00	
Address 1109 ELLISTON ST					
City OLD HICKORY	State TN				Zip Code 37183
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name CHAMBERS		STAFF/ CONSULTING		\$9750.00	
Address 1427C MCGAVOCK PIKE					
City NASHVILLE	State TN				Zip Code 37216
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name WHITE		STAFF/ CONSULTING		\$9000.00	
Address 8135 CLOVERLAND DR					
City NASHVILLE	State TN				Zip Code 37211
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name HARPETH STRATEGIES		ADVERTISING (PALM CARDS)		\$1325.00	
Address 7429 RIVERFRONT DR					
City NASHVILLE	State TN				Zip Code 37221
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.)					\$32320.59



ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE UNITED TENNESSEE YES ON 3		2. REPORT COVERING THE PERIOD		
		FROM: OCT 1	TO: OCT 29	
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$32320.59	
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 THOMAS LYNDSEY GROUP		FUNDRAISING CONSULTING	\$2500.00	
Address 2033 RICHARD JONES RD				
City NASHVILLE	State TN			Zip Code 37215
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name CUSTOMINK LLC		CAMPAIGN SHIRTS	\$2261.14	
Address 2910 DISTRICT AVENUE				
City FAIRFAX	State VA			Zip Code 92722
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name BRANSTETTER, STRANCH & JENNINGS		LEGAL CONSULTING	\$1000.00	
Address 223 ROSA L. PARKS AVE, SUITE 200				
City NASHVILLE	State TN			Zip Code 37203
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name CONSTANT CONTACT		CONTACT DATA	\$136.56	
Address 1601 TRAPELO RD				
City WALTHAM	State MA			Zip Code 02451
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name VOODOO ROCK		COMMEMORATIVE PRINTS ADVERTISING	\$2185.00	
Address				
City KNOXVILLE	State TN			Zip Code 37902
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name ROSEPEPPER		STAFF MEETING MEAL	\$133.82	
Address 1907 E NASHVILLE				
City NASHVILLE	State TN			Zip Code 37206
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.)			\$40537.11	



ITEMIZED STATEMENT OF EXPENDITURES - SMC

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		FROM: OCT 1	TO: OCT 29
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$40537.11
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
		SHIPPING SUPPLIES	\$80.52
Last Name/Business Name AMAZON			
Address 410 TERRY AVE N			
City SEATTLE	State WA	Zip Code 98109	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
		BILLBOARDS ADVERTISING	\$2000.00
Last Name/Business Name OUTFRONT MEDIA			
Address 405 LEXINGTON AVE			
City NEW YORK	State NY	Zip Code 10174	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
		CAMPAIGN FINANCE REPORTING	\$600.00
Last Name/Business Name ABNEY CPA PLLC			
Address 109 THEATER DR			
City CELINA	State TN	Zip Code 38551	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
		DIGITAL ADVERTISING	\$5000.00
Last Name/Business Name 31A COMMUNICATIONS			
Address 6733 CURRYWOOD DR			
City NASHVILLE	State TN	Zip Code 37205	
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.)			\$48217.63

