



## SUMMARY PAGE - SMC

11. NAME OF COMMITTEE (In Full) <i>Vote NO on One Tennessee, Inc</i>	12. REPORT COVERING THE PERIOD FROM <i>01/15/15</i> TO: <i>03/31/15</i>
<b>RECEIPTS</b>	
13. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period) .....	\$ <u>    -0-    </u>
b. Itemized Contributions (over \$100 from each source this period) .....	\$ <u>    -0-    </u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.) .....	\$ <u>    -0-    </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>    -0-    </u>
<b>DISBURSEMENTS</b>	
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>Marketing</u> .....	\$ <u>  48.15  </u>
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
Total of Expenditures (\$100 or less each payee) .....	\$ <u>  48.15  </u>
b. Itemized Expenditures (Over \$100 each payee this period) .....	\$ <u>34,975.55</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 17.a. and 17.b.) .....	\$ <u>35,023.70</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>35,023.70</u>
<b>20. IN-KIND CONTRIBUTIONS</b>	
a. Unitemized in-kind contributions (\$100 or less from each source this period) .....	\$ <u>    -0-    </u>
b. Itemized in-kind contributions (over \$100 from each source this period) .....	\$ <u>    -0-    </u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.) .....	\$ <u>    -0-    </u>
<b>21. LOANS</b>	
LOANS OUTSTANDING (must be shown in item 10.e.) .....	\$ <u>    -0-    </u>
<b>22. OBLIGATIONS</b>	
a. Unitemized Obligations Outstanding (\$100 or less each) .....	\$ <u>    -0-    </u>
b. Itemized Obligations Outstanding (Over \$100 each) .....	\$ <u>    -0-    </u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown in item 10.f.) .....	\$ <u>    -0-    </u>

## ITEMIZED STATEMENT OF EXPENDITURES - SMC

1 NAME OF COMMITTEE <i>Vote NO on One Tennessee, Inc</i>		2 REPORT COVERING THE PERIOD FROM <i>01/15/15</i> TO: <i>03/31/15</i>	
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>- 0 -</i>
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 <i>Smoller, R. P., Lamb, Roscarn + Birken</i>		<i>Legal Services</i>	<i>\$150.00</i>
Address <i>1025 Vermont Avenue #300</i>			
City <i>Washington</i>	State <i>DC</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Alexander's Catering</i>		<i>Catering Volunteers</i>	<i>\$121.25</i>
Address <i>511 Union Street #2624</i>			
City <i>Nashville</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>PP - Greater Memphis Region</i>		<i>Return of Unused Grant Funds</i>	<i>\$18,000.00</i>
Address <i>2430 Poplar Avenue #100</i>			
City <i>Memphis</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>ACLU - TN</i>		<i>Return of Unused Grant Funds</i>	<i>\$6,000.00</i>
Address <i>P.O. Box 1201100</i>			
City <i>Nashville</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>PP - Middle + East Tennessee</i>		<i>Return of Unused Grant Funds</i>	<i>\$18,704.30</i>
Address <i>50 Vantage Way #102</i>			
City <i>Nashville</i>	State <i>TN</i>		
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.)			<i>\$34,975.55</i>