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

1. DATE OF REPORT  
26 OCT 2014

2. NAME OF COMMITTEE  
VOTE NO ON 2

3. ADDRESS AND PHONE  
Street or Rural Route  
P.O. 168  
ALAMO  
TN  
38001  
Phone  
731.96.2791  
State  
Zip Code  
City

4. MEASURES SUPPORTED OR OPPOSED  
OPPOSE AMENDMENT # 2

5. A. NAME OF POLITICAL TREASURER  
FORREST SHOAF

6. CATEGORY OR REPORT (Check one)  
FIRST QUARTER  
SECOND QUARTER  
THIRD QUARTER  
FOURTH QUARTER  
PRE-PRIMARY  
PRE-GENERAL  
MID-YEAR  
SUPPLEMENTAL  
YEAR-END  

7. A. BEGINNING DATE OF REPORTING PERIOD  
OCT 1 2014

7. B. ENDING DATE OF REPORTING PERIOD  
OCT 25 2014

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.

9. WITNESS SIGNATURE  
Danielle A. Paris  
10/26/14

10. SUMMARY  
da. BALANCE ON HAND LAST REPORT  
4500  
$2,220.75

d. TOTAL RECEIPTS THIS PERIOD  
$45,000

d. TOTAL DISBURSEMENTS THIS PERIOD  
$35,480

d. BALANCE ON HAND (10a. plus 10b. minus 10c.)  
11,740.75

e. TOTAL LOANS OUTSTANDING  

f. TOTAL OBLIGATIONS OUTSTANDING  

## RECEIPTS

13. 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) $45,000 
   - c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.) $45,000

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.) $45,000

## 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)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cumulus Radio</td>
<td>$35,480</td>
</tr>
<tr>
<td></td>
<td>$</td>
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<td></td>
<td>$</td>
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<td>$</td>
</tr>
</tbody>
</table>

Total of Expenditures ($100 or less each payee) $ 

b. Itemized Expenditures (Over $100 each payee this period) $35,480 

c. TOTAL EXPENDITURES (other than loan repayments)(add 17.a. and 17.b.) $35,480

18. LOAN REPAYMENTS MADE THIS PERIOD $ 

19. TOTAL DISBURSEMENTS (add 17.c. and 18.) (must be shown in item 10.c.) $35,480

## IN-KIND CONTRIBUTIONS

20. 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.) $ 

## LOANS

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

## OBLIGATIONS

22. a. Unitemized Obligations Outstanding ($100 or less each) $NA 

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

c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown in item 10.f.) $NA
## ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. **NAME OF COMMITTEE**
   - Vote: NO on #2

2. **REPORT COVERING THE PERIOD**
   - From: 01/11/14
   - To: 10/31/14

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)**

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.I.</th>
<th>Last Name/Organization Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Occupation</th>
<th>Employer</th>
<th>Amount of Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>WALT</td>
<td></td>
<td>BAUMIT</td>
<td>30 E. DALE CT</td>
<td>GREENEVILLE</td>
<td>TN</td>
<td>37745</td>
<td>BEST EFFORTS</td>
<td></td>
<td>20000</td>
</tr>
<tr>
<td>FORREST</td>
<td></td>
<td>SHOAF</td>
<td>529 RIDGECREST LN</td>
<td>LEBANON</td>
<td>TN</td>
<td>37087</td>
<td>RETIRED</td>
<td></td>
<td>25000</td>
</tr>
</tbody>
</table>

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.)

   - Amount: $45,000
ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE
   VOTE NO ON #2

2. REPORT COVERING THE PERIOD
   FROM: 10/11/14 TO: 10/25/14

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.)

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Purpose of Expenditure</th>
<th>Amount of Expenditure</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>ADVERT</td>
<td>2964</td>
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<td>ADVERT</td>
<td>35480</td>
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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.)

   38444
ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE

2. REPORT COVERING PERIOD
   FROM: 10/1/14 TO: 10/25/14

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>First Name</th>
<th>Middle Name</th>
<th>Description of In-Kind Contribution</th>
<th>Value of In-Kind Contribution</th>
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</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.)