

SUMMARY PAGE - SMC

11. NAME OF COMMITTEE (In Full) <p style="text-align: center; font-weight: bold;">Yes on 1 Ballot Committee</p>	12. REPORT COVERING THE PERIOD FROM: <u>01/16/15</u> TO: <u>06/30/15</u>
RECEIPTS	
13. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>378.00</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>10,885.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)	\$ <u>11,263.00</u>
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>11,263.00</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)	
<u>Licenses & Permits</u>	\$ <u>42.25</u>
<u>Administrative</u>	\$ <u>22.25</u>
<u>Postage</u>	\$ <u>5.05</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>69.55</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>14,827.09</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 17.a. and 17.b..)	\$ <u>14,896.64</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>14,896.64</u>
20. 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 20.a. and 20.b.)	\$ _____
21. LOANS	
LOANS OUTSTANDING (must be shown in item 10.e.)	\$ <u>100,000.00</u>
22. OBLIGATIONS	
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 i item 10.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE Yes on 1 Ballot Committee		2. REPORT COVERING THE PERIOD FROM: 01/16/15 TO: 06/30/15	
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 Stacy	M.I.	Last Name/Organization Name Dunn	
Address 5309 LaVesta Rd			
City Knoxville	State TN	Zip Code 37918	
Occupation Director			Amount of Contribution \$1,500.00
Employer Tennessee Right to Life			
First Name Trecia	M.I.	Last Name/Organization Name Dillingham	
Address 214 Dawn Dr			
City Mount Juliet	State TN	Zip Code 37122	
Occupation Homemaker			Amount of Contribution \$110.00
Employer			
First Name Curtiss	M.I.	Last Name/Organization Name Sheldon	
Address 144 Dudala Way			
City Loudon	State TN	Zip Code 37774-6806	
Occupation Retired			Amount of Contribution \$7,250.00
Employer			
First Name	M.I.	Last Name/Organization Name Green Hills Baptist Church	
Address 13251 Lebanon Rd			
City Mount Juliet	State TN	Zip Code 37122	
Occupation			Amount of Contribution \$525.00
Employer			
First Name John	M.I. H	Last Name/Organization Name Kopmeier, Jr.	
Address 46 Bluff View Ter			
City Crossville	State TN	Zip Code 38558	
Occupation Retired			Amount of Contribution \$1,000
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 13b. of summary.)			\$10,385.00



ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

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3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$10,385.00
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 Tennessee Right to Life Education Fund	Amount of Contribution \$500.00
Address PO Box 110765			
City Nashville	State TN	Zip Code 37222-0765	
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 (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.)			\$10,885.00



ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE Yes on 1 Ballot Committee		2. REPORT COVERING THE PERIOD	
		FROM:01/16/15	TO: 06/30/15
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 Karen	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Brukardt		Interest	\$1,500
Address 2288 County Rd ZZ			
City DePere	State WI		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name That's Printing Inc.		Printing	\$825
Address 251 Second Ave S			
City Franklin, TN 37064	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name USImprints		Printing	\$612.09
Address 1724-A General George Patton Dr			
City Brentwood, TN 37027	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Nationbuilder		Database/Website	\$665
Address 448 S Hill St #200			
City Los Angeles	State CA		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Ballot Measure Domains LLC		Website	\$297
Address 12127 Mall Blvd Ste A262			
City Victorville	State CA		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Crossville Church of Christ		Advertising	\$800
Address PO Box 1010			
City Crossville, TN 38557-1010	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 campaign expenditures, this amount must be shown in item 17b. of summary.)			\$4,699.09



ITEMIZED STATEMENT OF EXPENDITURES - SMC

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3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$4,699.09	
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 Kelly Scott Madison		Advertising	\$10,000	
Address 303 E Wacker Dr 8th Floor				
City Chicago	State IL			Zip Code 60601
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name U.S. Postmaster		Occupancy	\$128	
Address Nolensville Pk				
City Nashville, TN 37211	State			Zip Code
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name				
Address				
City	State			Zip Code
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name				
Address				
City	State			Zip Code
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name				
Address				
City	State			Zip Code
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name				
Address				
City	State			Zip Code
First Name	Middle Name			Purpose 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.)				\$14,827.09



