

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC POLICY SECRETARY-OF-THE-SENATE 14 DEC -2 AM 11:03 7PM 10:56 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Elina For Senate

ADDRESS (number and street) 776 Mount Moriah Rd

Check if different than previously reported. (ACC) Memphis TN 38117 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER

C00561688 3. IS THIS REPORT NEW (N) OR AMENDED (A) TN

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports: April 15 Quarterly Report (Q1) [X] July 15 Quarterly Report (Q2) [X] October 15 Quarterly Report (Q3) [ ] January 31 Year-End Report (YE) [ ] Termination Report (TER) [ ]

(b) 12-Day PRE-Election Report for the: Primary (12P) [ ] General (12G) [ ] Runoff (12R) [ ] Convention (12C) [ ] Special (12S) [ ] Election on 08/07/2014 in the State of TN

(c) 30-Day POST-Election Report for the: General (30G) [ ] Runoff (30R) [ ] Special (30S) [ ] Election on [ ]/ [ ]/ [ ] in the State of [ ]

5. Covering Period 04/01/2014 through 06/30/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer LLOYD HETZER

Signature of Treasurer [Signature] Date 11/24/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

*FLINN for Senate*

Report Covering the Period: From:    To:

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ...                                     | 7000.00                 | 7000.00                            |
| (b) Total Contribution Refunds<br>(from Line 20(d)) ..  |                         |                                    |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) ...                     | 7000.00                 | 7000.00                            |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) ..   | 146331.70               | 146331.70                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) ...                                       |                         |                                    |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) ...                               | 146331.70               | 146331.70                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27)...                                       | 1665918.30              |                                    |
| 9. Debts and Obligations Owed TO<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ...  |                         |                                    |
| 10. Debts and Obligations Owed BY<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ... | 1805250.00              |                                    |

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

14021231160

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

---

Report Covering the Period: From: M M D Y Y Y To: M D D

| I. RECEIPTS   | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:  |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                    |
| (i) Itemized (use Schedule A)...  | 7,000.00                      | 7,000.00                           |
| (ii) Unitemized .....   |                               |                                    |
| (iii) TOTAL of contributions from individuals ..  |                               |                                    |
| (b) Political Party Committees...   |                               |                                    |
| (c) Other Political Committees (such as PACs)...  |                               |                                    |
| (d) The Candidate .....   |                               |                                    |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..          | 7,000.00                      | 7,000.00                           |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..   |                               |                                    |
| 13. LOANS:  |                               |                                    |
| (a) Made or Guaranteed by the Candidate...  | 1,805,250.00                  | 1,805,250.00                       |
| (b) All Other Loans...  |                               |                                    |
| (c) TOTAL LOANS (add Lines 13(a) and (b))...  | 1,805,250.00                  | 1,805,250.00                       |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..                               |                               |                                    |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....  |                               |                                    |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)... | 1,812,250.00                  | 1,812,250.00                       |

14021251101

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

| II. DISBURSEMENTS   | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES...   | 146,331.70                    | 146,331.70                         |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES ..                    |                               |                                    |
| 19. LOAN REPAYMENTS:  |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate...                |                               |                                    |
| (b) Of All Other Loans .....  |                               |                                    |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b))...             |                               |                                    |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                      |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees ...        |                               |                                    |
| (b) Political Party Committees...                                     |                               |                                    |
| (c) Other Political Committees<br>(such as PACs) ...                  |                               |                                    |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c))...  |                               |                                    |
| 21. OTHER DISBURSEMENTS ...   |                               |                                    |
| 22. TOTAL DISBURSEMENTS<br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 146,331.70                    | 146,331.70                         |

**III. CASH SUMMARY**

|   |              |
|---|--------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...                                | 0.00         |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...                            | 1,812,250.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)...   | 1,812,250.00 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...                               | 146,331.70   |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)... | 1,665,918.30 |

14021231102

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |   |                                     |                                     |                                    |                             |
|---|---|-------------------------------------|-------------------------------------|------------------------------------|-----------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                     |                                     |                                    | PAGE 1 OF 3                 |
|   | <input checked="" type="checkbox"/> 11a<br>12 | <input type="checkbox"/> 11b<br>13a | <input type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 | <input type="checkbox"/> 15 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Flinn for Senate*

A. Full Name (Last, First, Middle Initial)  
*Williams John*

Mailing Address  
*2997 Ashmont Dr.*

City *Germentown* State *TN* Zip Code *38138*

FEC ID number of contributing federal political committee. *C*

Name of Employer *Self Employed* Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*1,000.00*

Date of Receipt  
*05 12 2014*

Amount of Each Receipt this Period  
*1,000.00*

B. Full Name (Last, First, Middle Initial)  
*Williams Sue*

Mailing Address  
*2987 Ashmont Pr.*

City *GERMANTOWN* State *TN* Zip Code *38138*

FEC ID number of contributing federal political committee. *C*

Name of Employer *Housewife* Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*1,000.00*

Date of Receipt  
*05 12 2014*

Amount of Each Receipt this Period  
*1,000.00*

C. Full Name (Last, First, Middle Initial)  
~~\_\_\_\_\_~~

Mailing Address  
~~\_\_\_\_\_~~

City ~~\_\_\_\_\_~~ State ~~\_\_\_\_\_~~ Zip Code ~~\_\_\_\_\_~~

FEC ID number of contributing federal political committee. *C*

Name of Employer ~~\_\_\_\_\_~~ Occupation ~~\_\_\_\_\_~~

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
~~\_\_\_\_\_~~

Date of Receipt  
~~\_\_\_\_\_~~

Amount of Each Receipt this Period  
~~\_\_\_\_\_~~

SUBTOTAL of Receipts This Page (optional) ..... *2000.00*

TOTAL This Period (last page this line number only) .....

14021231103

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 3

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12             | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  |                             |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Finn for Senate

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br>A. <u>Tinkle, Paul F.</u>   |   | Date of Receipt<br>M M D D Y Y Y Y<br><u>06 04 2014</u> |
| Mailing Address<br><u>P.O. Box 815</u>   |   | Amount of Each Receipt this Period<br><br><u>500.00</u> |
| City<br><u>Martin</u>  | State Zip Code<br><u>TN 38237</u>           |   |
| FEC ID number of contributing federal political committee.<br><u>C</u>   |   | Amount of Each Receipt this Period<br><br><u>500.00</u> |
| Name of Employer<br><u>Self Employed</u>   | Occupation                                  |   |
| Receipt For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><br><u>500.00</u> |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br>B. <u>Mabie, Mathew W.</u>   |  | Date of Receipt<br>M M<br><br>                           |
| Mailing Address<br><u>4124 Baldwin Sq</u>   |  | Amount of Each Receipt this Period<br><br><u>4500.00</u> |
| City<br><u>Memphis</u>  | State Zip Code<br><u>TN 38117</u>            |  |
| FEC ID number of contributing federal political committee.<br><u>C</u>  |  | Amount of Each Receipt this Period<br><br><u>4500.00</u> |
| Name of Employer<br><u>Self Employed</u>  | Occupation                                   |  |
| Receipt For:<br><input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><br><u>4500.00</u> |  |

|   |                                |  |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>C. _____   |                                | Date of Receipt<br>M M<br><br>             |
| Mailing Address<br>_____  |                                | Amount of Each Receipt this Period<br><br> |
| City<br>_____   | State Zip Code<br>_____        |  |
| FEC ID number of contributing federal political committee.<br><u>C</u>  |                                | Amount of Each Receipt this Period<br><br> |
| Name of Employer<br>_____   | Occupation                     |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><br> |  |

|  |                 |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional).....           | <u>5,000.00</u> |
| TOTAL This Period (last page this line number only)..... | <u>7,000.00</u> |

14021291104

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |                                   |   |                              |                              |                             |
|---|-----------------------------------|---|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) |   |                              |                              | PAGE <u>2</u> OF <u>3</u>   |
|   | <input type="checkbox"/> 11a      | <input type="checkbox"/> 11b            | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |                             |
|   | <input type="checkbox"/> 12       | <input checked="" type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Flinn for Senate

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br>A. <u>Flinn, George, S. Jr</u>  |   | Date of Receipt<br>M M O D Y Y Y Y<br><u>04 25 2014</u>                                      |
| Mailing Address<br><u>472 Goodwyn Street</u>   |   | Amount of Each Receipt this Period<br><u>1,805,250.00</u><br><i>These are Personal Funds</i> |
| City<br><u>Memphis</u>   | State<br><u>TN</u> Zip Code<br><u>38111</u>   |  |
| FEC ID number of contributing federal political committee.<br><u>C</u>   |   |  |
| Name of Employer<br><u>Self Employed</u>   | Occupation<br><u>Physician/Bus. Owner</u>     |  |
| Receipt For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br><u>1,805,250.00</u> |  |

|   |                                 |                                    |
|---|---------------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial)<br>B. _____   |                                 | Date of Receipt<br>M M             |
| Mailing Address<br>_____<br>_____<br>_____<br>City _____ State _____ Zip Code _____   |                                 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.<br><u>C</u>  |                                 |                                    |
| Name of Employer<br>_____   | Occupation<br>_____             |                                    |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ |                                    |

|   |                                 |                                    |
|---|---------------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial)<br>C. _____   |                                 | Date of Receipt<br>M M             |
| Mailing Address<br>_____<br>_____<br>_____<br>City _____ State _____ Zip Code _____   |                                 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.<br><u>C</u>  |                                 |                                    |
| Name of Employer<br>_____   | Occupation<br>_____             |                                    |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ |                                    |

|   |  |
|---|--|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           |  |
| <b>TOTAL</b> This Period (last page this line number only)..... |  |

14021231165

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 29

17     18     19a     19b  
 20a     20b     20c     21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Flinn for Senate*

A. *BoST Buy*

Full Name (Last, First, Middle Initial)

Mailing Address *Winchester Road*

City *Memphis* State *TN* Zip Code *38125*

Purpose of Disbursement *Equipment*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M D D Y Y Y Y  
*05 12 2014*

Amount of Each Disbursement this Period  
*, 298.23*

Category/Type  
*006*

B. *Morris, Bobbi*

Full Name (Last, First, Middle Initial)

Mailing Address *3158 Birchton Glade*

City *Lakeland* State *TN* Zip Code *38002*

Purpose of Disbursement *Phone Bank*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M D D Y Y Y Y  
*04 28 2014*

Amount of Each Disbursement this Period  
*, 390.00*

Category/Type  
*003*

C. *Morris, Bobbi*

Full Name (Last, First, Middle Initial)

Mailing Address *3158 Birchton Glade*

City *Lakeland* State *TN* Zip Code *38002*

Purpose of Disbursement *Phone Bank*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M D D Y Y Y Y  
*05 06 2014*

Amount of Each Disbursement this Period  
*, 1,170.00*

Category/Type  
*003*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251166



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 29

|  |                             |                              |                              |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Flinn for Senate*

Full Name (Last, First, Middle Initial)

A. *Morris, Bobbi*

Mailing Address

*3158 Birchton Glade*

City

*Lakeland*

State

*TN*

Zip Code

*38002*

Purpose of Disbursement

*Phone Bank*

*003*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*05 14 2014*

Amount of Each Disbursement this Period

*1,950.00*

Full Name (Last, First, Middle Initial)

B. *Bristol Broadcasting*

Mailing Address

*PO Box 1389*

City

*Bristol*

State

*TN*

Zip Code

*24203*

Purpose of Disbursement

*RADIO*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*06 11 2014*

Amount of Each Disbursement this Period

*2,295.00*

Full Name (Last, First, Middle Initial)

C. *Bristol Broadcasting*

Mailing Address

*PO Box 1389*

City

*Bristol*

State

*TN*

Zip Code

*24203*

Purpose of Disbursement

*RADIO*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*06 25 2014*

Amount of Each Disbursement this Period

*2,295.00*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021231167

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |  |   |  |
|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                   | PAGE <u>3</u> OF <u>29</u>                                  |  |
|   | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Flinn for Senate

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><u>A. Callcentric</u>  |  | Date of Disbursement<br>M M / D D Y Y Y Y<br><u>05 / 13 / 2014</u> |
| Mailing Address<br><u>INTERNET CA</u>   |  | Amount of Each Disbursement this Period<br><u>, 20.00</u>          |
| City<br><u>CA</u>   | State<br><u>CA</u> Zip Code  |  |
| Purpose of Disbursement<br><u>Phone Service</u>   | Candidate Name   | Category/<br>Type<br><u>001</u>                                    |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><u>B. Callcentric</u>  |  | Date of Disbursement<br>M M / D D Y Y Y Y<br><u>05 / 19 / 2014</u> |
| Mailing Address<br><u>INTERNET CA</u>   |  | Amount of Each Disbursement this Period<br><u>, 20.00</u>          |
| City<br><u>CA</u>   | State<br><u>CA</u> Zip Code  |  |
| Purpose of Disbursement<br><u>Phone Service</u>   | Candidate Name   | Category/<br>Type<br><u>001</u>                                    |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><u>C. Callcentric</u>  |  | Date of Disbursement<br>M M / D D Y Y Y Y<br><u>05 / 21 / 2014</u> |
| Mailing Address<br><u>INTERNET CA</u>   |  | Amount of Each Disbursement this Period<br><u>, 20.00</u>          |
| City<br><u>CA</u>   | State<br><u>CA</u> Zip Code  |  |
| Purpose of Disbursement<br><u>Phone Service</u>   | Candidate Name   | Category/<br>Type<br><u>001</u>                                    |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|  |   |   |
|--|---|---|
| SUBTOTAL of Disbursements This Page (optional).....      | , | , |
| TOTAL This Period (last page this line number only)..... | , | , |

1402131108

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |  |                              |                              |                              |                            |
|---|--|------------------------------|------------------------------|------------------------------|----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)      |                              |                              |                              | PAGE <u>4</u> OF <u>29</u> |
|   | <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |                            |
|   | <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |                            |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Flinn for Senate

|  |   |  |
|--|---|--|
| A. <u>Callcentric</u><br>Full Name (Last, First, Middle Initial)   |   | Date of Disbursement<br>MM DD / Y Y Y Y<br><u>06 02 2014</u> |
| Mailing Address<br><u>Internet</u>   |   | Amount of Each Disbursement this Period<br><u>20.00</u>      |
| City<br><u>CA</u>  | State<br><u>CA</u> Zip Code   |  |
| Purpose of Disbursement<br><u>Phone Service</u>  |   | Category/<br>Type<br><u>001</u>                              |
| Candidate Name   |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:<br>District:  |   |  |

|  |   |   |
|--|---|---|
| B. <u>Petty Cash</u><br>Full Name (Last, First, Middle Initial)  |   | Date of Disbursement<br>MM DD / Y Y Y Y<br><u>06 02 2014</u>  |
| Mailing Address<br><u>776 Mt. Moriah Rd.</u>   |   | Amount of Each Disbursement this Period<br><u>,500.00</u><br><u>No one person received more than \$100.00</u> |
| City<br><u>Memphis</u>   | State<br><u>TN</u> Zip Code<br><u>38117</u>   |   |
| Purpose of Disbursement<br><u>Petty Cash / ATM withdraw</u>  |   | Category/<br>Type<br><u>001</u>   |
| Candidate Name<br><u>VARIOUS VOLUNTEERS FOR DRINKS SNACKS</u>  |   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State:<br>District:  |   |   |

|  |   |  |
|--|---|--|
| C. <u>Central Printing</u><br>Full Name (Last, First, Middle Initial)  |   | Date of Disbursement<br>MM DD / Y Y Y Y<br><u>04 30 2014</u> |
| Mailing Address<br><u>Airways Blvd</u>   |   | Amount of Each Disbursement this Period<br><u>,315.73</u>    |
| City<br><u>Memphis</u>   | State<br><u>TN</u> Zip Code   |  |
| Purpose of Disbursement<br><u>Printing</u>   |   | Category/<br>Type<br><u>006</u>                              |
| Candidate Name   |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:<br>District:  |   |  |

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251169

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 29

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Fliam for Senate

Full Name (Last, First, Middle Initial)

A. Central Printing

Mailing Address

Airways Blvd

City

Memphis

State

TN

Zip Code

Purpose of Disbursement

PRINTING

Candidate Name

003

Category/  
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Date of Disbursement

05 / 16 / 2014

Amount of Each Disbursement this Period

8,200.00

B. Central Printing

Mailing Address

Airways Blvd.

City

Memphis

State

TN

Zip Code

Purpose of Disbursement

PRINTING

Candidate Name

004

Category/  
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Date of Disbursement

05 / 19 / 2014

Amount of Each Disbursement this Period

758.50

C. Central Printing

Mailing Address

Airways Blvd

City

Memphis

State

TN

Zip Code

Purpose of Disbursement

PRINTING

Candidate Name

001

Category/  
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Date of Disbursement

06 / 24 / 2014

Amount of Each Disbursement this Period

190.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251170

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE **6** OF **29**

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Flinn for Senate*

Full Name (Last, First, Middle Initial)

A. *Clear Channel*

Mailing Address

Date of Disbursement

*06 06 2014*

City *Knoxville*

State *TN*

Zip Code *37919*

Amount of Each Disbursement this Period

*1,292.85*

Purpose of Disbursement

*RADIO*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. *Clear Channel*

Mailing Address

*55 Music Sq.*

Date of Disbursement

*06 24 2014*

City *Nashville*

State *TN*

Zip Code *37203*

Amount of Each Disbursement this Period

*1,002.15*

Purpose of Disbursement

*RADIO*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. *Clear Channel*

Mailing Address

Date of Disbursement

*06 25 2014*

City *Knoxville*

State *TN*

Zip Code *37919*

Amount of Each Disbursement this Period

*2,004.30*

Purpose of Disbursement

*RADIO*

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021231171

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |                            |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|----------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    |                                     |                                    | PAGE <b>7</b> OF <b>29</b> |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |                            |  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Flinn for Senate**

|  |   |  |   |
|--|---|--|---|
| A. Full Name (Last, First, Middle Initial)<br><b>Cookville Communications</b>  |   | Date of Disbursement<br>MM DD YY YY<br><b>06 09 2014</b> |   |
| Mailing Address<br><b>698 S. Willow</b>  |   |  |   |
| City<br><b>Cookville</b>   | State<br><b>TN</b>  | Zip Code<br><b>38501</b>                                 | Amount of Each Disbursement this Period<br><br><b>,333.16</b> |
| Purpose of Disbursement<br><b>RADIO</b>  |   | Category/<br>Type<br><b>004</b>                          |   |
| Candidate Name   |   |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |   |
| State:   | District:   |  |   |

|  |   |  |   |
|--|---|--|---|
| B. Full Name (Last, First, Middle Initial)<br><b>Cookville Communications</b>  |   | Date of Disbursement<br>MM DD YY YY<br><b>06 23 2014</b> |   |
| Mailing Address<br><b>698 S. Willow</b>  |   |  |   |
| City<br><b>Cookville</b>   | State<br><b>TN</b>  | Zip Code<br><b>38501</b>                                 | Amount of Each Disbursement this Period<br><br><b>,333.16</b> |
| Purpose of Disbursement<br><b>RADIO</b>  |   | Category/<br>Type<br><b>004</b>                          |   |
| Candidate Name   |   |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |   |
| State:   | District:   |  |   |

|  |   |  |   |
|--|---|--|---|
| C. Full Name (Last, First, Middle Initial)<br><b>CROCKETT Rockett</b>  |   | Date of Disbursement<br>MM DD YY YY<br><b>06 11 2014</b> |   |
| Mailing Address<br><b>PO Box 425</b>   |   |  |   |
| City<br><b>Alamo</b>   | State<br><b>TN</b>  | Zip Code<br><b>38001</b>                                 | Amount of Each Disbursement this Period<br><br><b>,160.00</b> |
| Purpose of Disbursement<br><b>NEWSPAPER Ad</b>   |   | Category/<br>Type<br><b>004</b>                          |   |
| Candidate Name   |   |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |   |
| State:   | District:   |  |   |

|  |  |
|--|--|
| SUBTOTAL of Disbursements This Page (optional).....      |  |
| TOTAL This Period (last page this line number only)..... |  |

14021231172

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |  |                             |                              |                              |                              |                              |
|---|--|-----------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)      |                             |                              |                              | PAGE <b>8</b> OF <b>29</b>   |                              |
|   | <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b |
|   | <input type="checkbox"/> 20c           | <input type="checkbox"/> 21 |                              |                              |                              |                              |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Flinn for Senate**

|  |   |  |                                 |
|--|---|--|---------------------------------|
| A. Full Name (Last, First, Middle Initial)<br><b>Cumulus - Knoxville</b>   |   | Date of Disbursement<br>M M D D Y Y Y Y<br><b>06 09 2014</b> |                                 |
| Mailing Address  |   | Amount of Each Disbursement this Period<br><b>, 688.50</b>   |                                 |
| City<br><b>Knoxville</b>   | State<br><b>TN</b>  | Zip Code   | Category/<br>Type<br><b>004</b> |
| Purpose of Disbursement<br><b>RADIO</b>  |   |  |                                 |
| Candidate Name   |   |  |                                 |
| Office Sought:<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> House<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |                                 |
| State:   | District:   |  |                                 |

|  |   |  |                                 |
|--|---|--|---------------------------------|
| B. Full Name (Last, First, Middle Initial)<br><b>Cumulus - Knoxville</b>   |   | Date of Disbursement<br>M M D D Y Y Y Y<br><b>06 25 2014</b> |                                 |
| Mailing Address<br><b>4711 Old Kingston PK</b>   |   | Amount of Each Disbursement this Period<br><b>, 688.50</b>   |                                 |
| City<br><b>Knoxville</b>   | State<br><b>TN</b>  | Zip Code<br><b>37919</b>                                     | Category/<br>Type<br><b>004</b> |
| Purpose of Disbursement<br><b>RADIO</b>  |   |  |                                 |
| Candidate Name   |   |  |                                 |
| Office Sought:<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> House<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |                                 |
| State:   | District:   |  |                                 |

|  |   |  |                                 |
|--|---|--|---------------------------------|
| C. Full Name (Last, First, Middle Initial)<br><b>Cumulus - Nashville</b>   |   | Date of Disbursement<br>M M D D Y Y Y Y<br><b>06 06 2014</b> |                                 |
| Mailing Address<br><b>10 Music Circle</b>  |   | Amount of Each Disbursement this Period<br><b>, 1338.75</b>  |                                 |
| City<br><b>Nashville</b>   | State<br><b>TN</b>  | Zip Code<br><b>37203</b>                                     | Category/<br>Type<br><b>004</b> |
| Purpose of Disbursement<br><b>RADIO</b>  |   |  |                                 |
| Candidate Name   |   |  |                                 |
| Office Sought:<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> House<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |                                 |
| State:   | District:   |  |                                 |

|  |  |
|--|--|
| SUBTOTAL of Disbursements This Page (optional).....      |  |
| TOTAL This Period (last page this line number only)..... |  |

14021251175

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 29

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Flinn for Senate*

Full Name (Last, First, Middle Initial)

A. *Cumulus - Nashville*

Mailing Address

*10 music Circle*

City

*Nashville*

State

*TN*

Zip Code

*37203*

Purpose of Disbursement

*RADIO*

Candidate Name

*004*  
Category/  
Type

Date of Disbursement

*06 23 2014*

Amount of Each Disbursement this Period

*1,721.25*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. *Eugene Bryan*

Mailing Address

*8923 Hickory Trail*

City

*CORDOVA*

State

*TN*

Zip Code

*38018*

Purpose of Disbursement

*Campaign Services*

Candidate Name

*Voted ID, Mail & Communication Service*

*001*  
Category/  
Type

Date of Disbursement

*06 01 2014*

Amount of Each Disbursement this Period

*3,000.00*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. *Facebook*

Mailing Address

*online*

City

State

Zip Code

Purpose of Disbursement

*Ads*

Candidate Name

*004*  
Category/  
Type

Date of Disbursement

*06 18 2014*

Amount of Each Disbursement this Period

*250.24*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251174



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 29

17     18     19a     19b  
 20a     20b     20c     21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Flinn for Senate*

Full Name (Last, First, Middle Initial)

A. *Facebook*

Mailing Address

*online*

City

State

Zip Code

Purpose of Disbursement

*Ads*

Candidate Name

*004*  
Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

*06 25 2014*

Amount of Each Disbursement this Period

*,500.46*

Full Name (Last, First, Middle Initial)

B. *Federal Express*

Mailing Address

*GERMANTOWN PKW*

City

State

Zip Code

*Cordova*

*TN*

*3806*

Purpose of Disbursement

*POSTAGE*

Candidate Name

*001*  
Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

*05 27 2014*

Amount of Each Disbursement this Period

*,335.75*

Full Name (Last, First, Middle Initial)

C. *Federal Express*

Mailing Address

*GERMANTOWN PKW*

City

State

Zip Code

*Cordova*

*TN*

*38016*

Purpose of Disbursement

*POSTAGE*

Candidate Name

*001*  
Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

*06 09 2014*

Amount of Each Disbursement this Period

*,2125*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251175

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 29

17     18     19a     19b  
20a    20b    20c    21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Flinn for Senate*

Full Name (Last, First, Middle Initial)

A. *Federal Express*

Mailing Address

*Germantown Parkway*

City

*Cordova*

State

*TN*

Zip Code

*38016*

Purpose of Disbursement

*Postage*

Candidate Name

*001*  
Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

*06 19 2014*

Amount of Each Disbursement this Period

*, , 46.50*

Full Name (Last, First, Middle Initial)

B. *Federal Express*

Mailing Address

*Bartlett Blvd.*

City

*Bartlett*

State

*TN*

Zip Code

*38134*

Purpose of Disbursement

*Postage*

Candidate Name

*001*  
Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

*06 23 2014*

Amount of Each Disbursement this Period

*, , 58.92*

Full Name (Last, First, Middle Initial)

C. *Flinn Broadcasting*

Mailing Address

*7076 Mt. Moriah Rd. Ext.*

City

*Memphis*

State

*TN*

Zip Code

*38115*

Purpose of Disbursement

*RADIO*

Candidate Name

*004*  
Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

*05 08 2014*

Amount of Each Disbursement this Period

*, , 2482.00*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021231176

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Flinn for Senate*

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br>A. <i>Flinn Broadcasting</i>  |  | Date of Disbursement<br>MM DD YYYY<br><i>06 25 2014</i>        |
| Mailing Address<br><i>7076 Mt Moriah Rd EXT</i>  |  | Amount of Each Disbursement this Period<br><br><i>1,290.00</i> |
| City<br><i>Memphis</i>   | State<br><i>TN</i>   |  |
| Purpose of Disbursement<br><i>RADIO</i>  |  | Category/<br>Type<br><i>004</i>                                |
| Candidate Name   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> House<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:   | District:  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br>B. <i>Forever Communications</i>  |  | Date of Disbursement<br>MM DD YYYY<br><i>06 09 2014</i>      |
| Mailing Address<br><i>122 Radio Rd.</i>  |  | Amount of Each Disbursement this Period<br><br><i>673.20</i> |
| City<br><i>Jackson</i>   | State<br><i>TN</i>   |  |
| Purpose of Disbursement<br><i>RADIO</i>  |  | Category/<br>Type<br><i>004</i>                              |
| Candidate Name   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> House<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:   | District:  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br>C. <i>Forever Communications</i>  |  | Date of Disbursement<br>MM DD YYYY<br><i>06 23 2014</i>      |
| Mailing Address<br><i>122 Radio Rd.</i>  |  | Amount of Each Disbursement this Period<br><br><i>673.20</i> |
| City<br><i>Jackson</i>   | State<br><i>TN</i>   |  |
| Purpose of Disbursement<br><i>RADIO</i>  |  | Category/<br>Type<br><i>004</i>                              |
| Candidate Name   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> House<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:   | District:  |  |

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251177

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Fin for Senate*

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br>A. <i>Bryan, Gene</i>   |   | Date of Disbursement<br><i>04 29 2014</i>   |
| Mailing Address<br><i>8923 Hickory Trail</i>   |   | Amount of Each Disbursement this Period<br><br><i>114.20</i><br><i>FedEx Germantown Parkway, Cordova, TN</i><br><i>04/28/2014</i> |
| City<br><i>Cordova</i>   | State<br><i>TN</i>  |   |
| Zip Code<br><i>38018</i>   | Purpose of Disbursement<br><i>Reimbursement - Postage FedEx</i>   |   |
| Candidate Name   | Category/Type<br><i>001</i>   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State:<br>District:  |   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br>B. <i>Bryan, Gene</i>   |   | Date of Disbursement<br><i>06 01 2014</i>                    |
| Mailing Address<br><i>8923 Hickory Trail</i>   |   | Amount of Each Disbursement this Period<br><br><i>500.00</i> |
| City<br><i>Cordova</i>   | State<br><i>TN</i>  |  |
| Zip Code<br><i>38018</i>   | Purpose of Disbursement<br><i>Communication Services</i>  |  |
| Candidate Name   | Category/Type<br><i>004</i>   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:<br>District:  |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br>C. <i>Harland Clark</i>   |   | Date of Disbursement<br><i>05 09 2014</i>                    |
| Mailing Address<br><i>Billed Thru Regions Bank</i>   |   | Amount of Each Disbursement this Period<br><br><i>107.46</i> |
| City<br><i>Memphis</i>   | State<br><i>TN</i>  |  |
| Zip Code<br><i>38120</i>   | Purpose of Disbursement<br><i>Bank Checks Print</i>   |  |
| Candidate Name   | Category/Type<br><i>006</i>   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:<br>District:  |   |  |

SUBTOTAL of Disbursements This Page (optional).....  
 TOTAL This Period (last page this line number only).....

14021251178

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 29

17     18     19a     19b  
20a    20b    20c    21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Flinn for Senate

Full Name (Last, First, Middle Initial)

A. PATE, Hillary

Mailing Address

P.O. Box 680541

City

Franklin

State

TN

Zip Code

37068

Purpose of Disbursement

Communications STAFF

001

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

06 15 2014

Amount of Each Disbursement this Period

, 12500.00

Full Name (Last, First, Middle Initial)

B. KVTV

Mailing Address

P.O. Box 5000

City

Union City

State

TN

Zip Code

38281

Purpose of Disbursement

RADIO

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

05 21 2014

Amount of Each Disbursement this Period

, 472.77

Full Name (Last, First, Middle Initial)

C. Lady Printing

Mailing Address

ON-line

City

State

Zip Code

Purpose of Disbursement

PRINTING

004  
Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

06 24 2014

Amount of Each Disbursement this Period

, 158.75

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251179

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Hinn for Senate*

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br>A. <i>Jalson, Lech</i>  |   | Date of Disbursement<br>M M D D Y Y Y Y<br><i>00 18 2014</i>   |
| Mailing Address  |   | Amount of Each Disbursement this Period<br><br><i>, 462.00</i> |
| City<br><i>Memphis</i>   | State<br><i>TN</i>  |  |
| Zip Code<br><i>38104</i>   |   |  |
| Purpose of Disbursement<br><i>Intern</i>   | Candidate Name  | Category/<br>Type<br><i>001</i>                                |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:   | District:   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br>B. <i>Heerwood, Mae</i>   |   | Date of Disbursement<br>M M D D Y Y Y Y<br><i>05 16 2014</i>     |
| Mailing Address<br><i>2094 Cuba-Millington Rd.</i>   |   | Amount of Each Disbursement this Period<br><br><i>, 1,125.50</i> |
| City<br><i>Millington</i>  | State<br><i>TN</i>  |  |
| Zip Code<br><i>38053</i>   |   |  |
| Purpose of Disbursement<br><i>CAMPAIGN MGT</i>   | Candidate Name  | Category/<br>Type<br><i>001</i>                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:   | District:   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br>C. <i>Yearwood, MAE</i>   |   | Date of Disbursement<br>M M D D Y Y Y Y<br><i>06 01 2014</i>     |
| Mailing Address<br><i>2094 Cuba Millington Rd.</i>   |   | Amount of Each Disbursement this Period<br><br><i>, 1,125.50</i> |
| City<br><i>Millington</i>  | State<br><i>TN</i>  |  |
| Zip Code<br><i>38053</i>   |   |  |
| Purpose of Disbursement<br><i>CAMPAIGN MGT</i>   | Candidate Name  | Category/<br>Type<br><i>001</i>                                  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:   | District:   |  |

|  |     |
|--|-----|
| SUBTOTAL of Disbursements This Page (optional).....      | , , |
| TOTAL This Period (last page this line number only)..... | , , |

14021251180

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 29  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Flinn for Senate*

A. *Yearwood, MAE*  
 Mailing Address: *2094 Cuba Millington Rd.*  
 City: *Millington* State: *TN* Zip Code: *38053*  
 Purpose of Disbursement: *Campaign Mgt*  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement: *06 15 2014*  
 Amount of Each Disbursement this Period: *1,125.50*  
 Category/Type: \_\_\_\_\_

B. *NCC Media*  
 Mailing Address: *3525 Piedmont*  
 City: *ATLANTA* State: *GA* Zip Code: *30305*  
 Purpose of Disbursement: *Cable TV*  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement: *06 06 2014*  
 Amount of Each Disbursement this Period: *33,173.00*  
 Category/Type: *004*

C. *NCC Media*  
 Mailing Address: *3525 Piedmont*  
 City: *ATLANTA* State: *GA* Zip Code: *30305*  
 Purpose of Disbursement: *Cable TV*  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement: *06 19 2014*  
 Amount of Each Disbursement this Period: *26,983.00*  
 Category/Type: *004*

SUBTOTAL of Disbursements This Page (optional).....  
 TOTAL This Period (last page this line number only).....

14021251101

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 29

17     18     19a     19b  
20a    20b    20c    21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Flinn for Senate

Full Name (Last, First, Middle Initial)

A. Reg Broadcasting

Mailing Address

Date of Disbursement

06 06 2014

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

RADIO

004

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Reg Broad Casting

Mailing Address

961 Miller Ave

Date of Disbursement

06 24 2014

City State Zip Code

Crossville TN 38535

Amount of Each Disbursement this Period

Purpose of Disbursement

RADIO

004

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Thunderbolt Communicators

Mailing Address

P.O. Box 5000

Date of Disbursement

06 09 2014

City State Zip Code

Union City IN 38281

Amount of Each Disbursement this Period

Purpose of Disbursement

RADIO

004

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251102



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 29

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Flinn for Senate*

Full Name (Last, First, Middle Initial)

A. *Thunderbolt Communications*

Mailing Address

*P.O. Box 5000*

City

*Union City TN*

State

Zip Code

*38281*

Purpose of Disbursement

*Radio*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*06 23 2014*

Amount of Each Disbursement this Period

*, 1,03.13*

Full Name (Last, First, Middle Initial)

B. *TN Radio Network*

Mailing Address

City

*Nashville TN*

State

Zip Code

Purpose of Disbursement

*Radio*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*04 29 2014*

Amount of Each Disbursement this Period

*, 2,371.50*

Full Name (Last, First, Middle Initial)

C. *USPS*

Mailing Address

*S. Third Street*

City

*Memphis TN*

State

Zip Code

*38103*

Purpose of Disbursement

*Postage*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*05 15 2014*

Amount of Each Disbursement this Period

*, 3,687.15*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021231103

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 29

17     18     19a     19b  
 20a     20b     20c     21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Finn for Senate*

A. *Voicent Communications*  
Mailing Address: *Internet*  
City: \_\_\_\_\_ State: *CA* Zip Code: \_\_\_\_\_  
Purpose of Disbursement: *Campaign Software* Category/Type: *006*  
Candidate Name: \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_  
Date of Disbursement: *05/13/2014*  
Amount of Each Disbursement this Period: *1,247.00*

B. *Voicent Communications*  
Mailing Address: *Internet*  
City: \_\_\_\_\_ State: *CA* Zip Code: \_\_\_\_\_  
Purpose of Disbursement: *Software Support* Category/Type: *006*  
Candidate Name: \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_  
Date of Disbursement: *05/12/2014*  
Amount of Each Disbursement this Period: *59.00*

C. *WAEW AM*  
Mailing Address: *961 Miller Ave*  
City: *Crossville* State: *TN* Zip Code: *38555*  
Purpose of Disbursement: *RADIO* Category/Type: *004*  
Candidate Name: \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_  
Date of Disbursement: *05/21/2014*  
Amount of Each Disbursement this Period: *630.00*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251104

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 29

17     18     19a     19b  
20a    20b    20c    21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Fling for Senate*

Full Name (Last, First, Middle Initial)

A. *WAYA*

Mailing Address

Date of Disbursement

*06 09 2014*

City *Madisonville* State *TN* Zip Code *37354*

Amount of Each Disbursement this Period

Purpose of Disbursement

*Radio*

*004*  
Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. *WAYA*

Mailing Address

*06 23 2014*

City *Madisonville* State *TN* Zip Code *37354*

Amount of Each Disbursement this Period

Purpose of Disbursement

*Radio*

*004*  
Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. *WBAC*

Mailing Address

*05 21 2014*

City *Cleveland* State *TN* Zip Code *37311*

Amount of Each Disbursement this Period

Purpose of Disbursement

*Radio*

*004*  
Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1402123113

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 29  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Flinn for Senate*

A. *WCB1*  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: *339 B EAST MAIN*  
 City: *Tupelo* State: *MS* Zip Code: *38801*  
 Purpose of Disbursement: *RADIO*  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement: *06 09 2014*  
 Amount of Each Disbursement this Period: *263.93*  
 Category/Type: *004*

B. *WCB1*  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: *339 B EAST MAIN*  
 City: *Tupelo* State: *MS* Zip Code: *38801*  
 Purpose of Disbursement: *RADIO*  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement: *06 24 2014*  
 Amount of Each Disbursement this Period: *263.93*  
 Category/Type: *004*

C. *WCMT*  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: *P.O. Box 5000*  
 City: *Union City TN* State: *TN* Zip Code: *38281*  
 Purpose of Disbursement: *RADIO*  
 Candidate Name: \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement: *05 21 2014*  
 Amount of Each Disbursement this Period: *472.77*  
 Category/Type: *004*

SUBTOTAL of Disbursements This Page (optional) \_\_\_\_\_  
 TOTAL This Period (last page this line number only) \_\_\_\_\_

14021231100

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 29

17  
 20a     18  
 20b     19a  
 20c     19b  
 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Flinn for Senate*

Full Name (Last, First, Middle Initial)

A.

*WEIO*

Mailing Address

*215 Baker Rd.*

City

*Huntington*

State

*TN*

Zip Code

*38344*

Purpose of Disbursement

*RADIO*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

*05 21 2014*

Amount of Each Disbursement this Period

*, 26393*

Full Name (Last, First, Middle Initial)

B.

*WGOV-AM*

Mailing Address

*821 Pinewalke*

City

*CHATTANOOGA*

State

*TN*

Zip Code

*37401*

Purpose of Disbursement

*RADIO*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

*04 29 2014*

Amount of Each Disbursement this Period

*, 91800*

Full Name (Last, First, Middle Initial)

C.

*WHUB*

Mailing Address

*698 S. Willow*

City

*Cookville*

State

*TN*

Zip Code

*38501*

Purpose of Disbursement

*RADIO*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

*05 21 2014*

Amount of Each Disbursement this Period

*, 333.16*

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251187

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one).

PAGE 23 OF 29

17     18     19a     19b  
20a    20b    20c    21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Flinn for Senate

Full Name (Last, First, Middle Initial)

A. WILD

Mailing Address

102 N. CASS

City

Corinth

State

MS

Zip Code

38834

Purpose of Disbursement

RADIO

004

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

06 / 09 / 2014

Amount of Each Disbursement this Period

,165.75

Full Name (Last, First, Middle Initial)

B. WILD

Mailing Address

102 N. CASS

City

Corinth

State

MS

Zip Code

38834

Purpose of Disbursement

RADIO

004

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

06 / 25 / 2014

Amount of Each Disbursement this Period

,174.25

Full Name (Last, First, Middle Initial)

C. WKRM

Mailing Address

315 W. Seventh

City

Columbia

State

TN

Zip Code

3840

Purpose of Disbursement

RADIO

004

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State:

District:

Date of Disbursement

05 / 21 / 2014

Amount of Each Disbursement this Period

,111.08

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

11031210

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 29

17  18  19a  19b  
 20a  20b  20c  21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Flinn for Senate*

Full Name (Last, First, Middle Initial)

A. *WKRM*

Date of Disbursement

*06 06 2014*

Mailing Address

*315 W. Seventh*

City

*Columbia*

State

*TN*

Zip Code

*38840*

Amount of Each Disbursement this Period

*, 111.08*

Purpose of Disbursement

*Radio*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. *WKRM*

Date of Disbursement

*06 23 2014*

Mailing Address

*315 W. Seventh*

City

*Columbia*

State

*TN*

Zip Code

*38840*

Amount of Each Disbursement this Period

*, 222.16*

Purpose of Disbursement

*Radio*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. *WLAC*

Date of Disbursement

*04 29 2014*

Mailing Address

*55 Music St.*

City

*Nashville*

State

*TN*

Zip Code

*38203*

Amount of Each Disbursement this Period

*, 4578.60*

Purpose of Disbursement

*Radio*

*004*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021251109

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 29

17  
20a     18  
20b     19a  
20c     19b  
21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Flinn for Senate*

|   |  |  |
|---|--|--|
| A. Full Name (Last, First, Middle Initial)<br><i>WLAQ</i>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><i>05 21 2014</i> |
| Mailing Address<br><i>55 Music Sq.</i>  |  | Amount of Each Disbursement this Period<br><br><i>1,292.85</i>   |
| City<br><i>Nashville</i>  | State<br><i>TN</i>   |  |
| Zip Code<br><i>37203</i>  |  | Category/<br>Type<br><i>004</i>                                  |
| Purpose of Disbursement<br><i>RADIO</i>   |  |  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:  | District:  |  |

|  |   |  |
|--|---|--|
| B. Full Name (Last, First, Middle Initial)<br><i>WNFZ</i>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><i>04 29 2014</i> |
| Mailing Address<br><i>8081 Kingston Pk</i>   |   | Amount of Each Disbursement this Period<br><br><i>1,384.00</i>   |
| City<br><i>Knoxville</i>   | State<br><i>TN</i>  |  |
| Zip Code<br><i>37919</i>   |   | Category/<br>Type<br><i>004</i>                                  |
| Purpose of Disbursement<br><i>RADIO</i>  |   |  |
| Candidate Name   |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:   | District:   |  |

|  |  |  |
|--|--|--|
| C. Full Name (Last, First, Middle Initial)<br><i>WOKT</i>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><i>05 21 2014</i> |
| Mailing Address<br><i>4711 Old Kingston Pk</i>   |  | Amount of Each Disbursement this Period<br><br><i>688.50</i>     |
| City<br><i>Knoxville</i>   | State<br><i>TN</i>   |  |
| Zip Code<br><i>37939</i>   |  | Category/<br>Type<br><i>004</i>                                  |
| Purpose of Disbursement<br><i>RADIO</i>  |  |  |
| Candidate Name   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State:   | District:  |  |

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021231190



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Flinn for Senate*

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><i>WORM</i>   |   | Date of Disbursement<br><i>05 21 2014</i>                 |
| Mailing Address<br><i>165 Bowen Rd.</i>  |   | Amount of Each Disbursement this Period<br><i>,384.00</i> |
| City<br><i>SAVANNAH</i>  | State<br><i>TN</i>  |   |
| Purpose of Disbursement<br><i>Radio</i>  |   | Category/<br>Type<br><i>004</i>                           |
| Candidate Name   |   |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State:   | District:   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><i>WORM</i>   |   | Date of Disbursement<br><i>06 05 2014</i>                 |
| Mailing Address<br><i>165 Bowen Rd.</i>  |   | Amount of Each Disbursement this Period<br><i>,324.00</i> |
| City<br><i>SAVANNAH</i>  | State<br><i>TN</i>  |   |
| Purpose of Disbursement<br><i>Radio</i>  |   | Category/<br>Type<br><i>004</i>                           |
| Candidate Name   |   |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State:   | District:   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><i>WORM</i>   |   | Date of Disbursement<br><i>06 19 2014</i>                 |
| Mailing Address<br><i>165 Bowen Rd.</i>  |   | Amount of Each Disbursement this Period<br><i>,324.00</i> |
| City<br><i>SAVANNAH</i>  | State<br><i>TN</i>  |   |
| Purpose of Disbursement<br><i>Radio</i>  |   | Category/<br>Type<br><i>004</i>                           |
| Candidate Name   |   |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State:   | District:   |   |

|  |   |   |
|--|---|---|
| SUBTOTAL of Disbursements This Page (optional).....      | , |   |
| TOTAL This Period (last page this line number only)..... | , | , |

1402121191

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Flinn for Senate*

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br>A. <i>WTJS - WTJJ</i>  |   | Date of Disbursement<br>M M ' D D Y Y Y Y<br><i>04 29 2014</i> |
| Mailing Address<br><i>122 Radio Rd</i>  |   | Amount of Each Disbursement this Period<br><br><i>,673.20</i>  |
| City<br><i>Jackson</i>  | State<br><i>TN</i> Zip Code<br><i>38301</i>   |  |
| Purpose of Disbursement<br><i>Radio</i>   | Candidate Name  | Category/<br>Type<br><i>004</i>                                |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: _____ District: _____  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br>B. <i>WTJS - WTJJ</i>  |   | Date of Disbursement<br>M M ' D D Y Y Y Y<br><i>05 21 2014</i> |
| Mailing Address<br><i>122 Radio Rd.</i>   |   | Amount of Each Disbursement this Period<br><br><i>,673.20</i>  |
| City<br><i>Jackson</i>  | State<br><i>TN</i> Zip Code<br><i>38301</i>   |  |
| Purpose of Disbursement<br><i>Radio</i>   | Candidate Name  | Category/<br>Type<br><i>004</i>                                |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: _____ District: _____  |   |  |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>C. <i>WWTN - FM</i>  |   | Date of Disbursement<br>M M ' D D Y Y Y Y<br><i>05 21 2014</i>  |
| Mailing Address<br><i>One Gaylor Dr.</i>  |   | Amount of Each Disbursement this Period<br><br><i>,1,168.75</i> |
| City<br><i>Nashville</i>  | State<br><i>TN</i> Zip Code<br><i>37214</i>   |   |
| Purpose of Disbursement<br><i>Radio</i>   | Candidate Name  | Category/<br>Type<br><i>004</i>                                 |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: _____ District: _____  |   |   |

|  |   |   |
|--|---|---|
| SUBTOTAL of Disbursements This Page (optional).....      | , | , |
| TOTAL This Period (last page this line number only)..... | , | , |

14021251192

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
*Finn for Senate*

|  |                    |   |
|--|--------------------|---|
| Full Name (Last, First, Middle Initial)<br>A. <i>WXBQ</i>  |                    | Date of Disbursement<br>MM/DD/YYYY<br><i>05/21/2014</i>   |
| Mailing Address<br><i>901 EAST VALLEY DR.</i>  |                    | Amount of Each Disbursement this Period<br><br><i>2,295.00</i>  |
| City<br><i>Bristol</i>   | State<br><i>VA</i> |   |
| Zip Code<br><i>24201</i>   |                    | Category/<br>Type<br><i>004</i>   |
| Purpose of Disbursement<br><i>RADIO</i>  |                    |   |
| Candidate Name   |                    | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| Office Sought:<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> House<br><input type="checkbox"/> President | State: District:   |   |

|  |                    |   |
|--|--------------------|---|
| Full Name (Last, First, Middle Initial)<br>B. <i>WYDL</i>  |                    | Date of Disbursement<br>MM/DD/YYYY<br><i>05/21/2014</i>   |
| Mailing Address<br><i>102 N. CASS</i>  |                    | Amount of Each Disbursement this Period<br><br><i>, 165.75</i>  |
| City<br><i>Corinth</i>   | State<br><i>MS</i> |   |
| Zip Code<br><i>38834</i>   |                    | Category/<br>Type<br><i>004</i>   |
| Purpose of Disbursement<br><i>RADIO</i>  |                    |   |
| Candidate Name   |                    | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| Office Sought:<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> House<br><input type="checkbox"/> President | State: District:   |   |

|  |                    |   |
|--|--------------------|---|
| Full Name (Last, First, Middle Initial)<br>C. <i>WVXI</i>  |                    | Date of Disbursement<br>MM/DD/YYYY<br><i>05/21/2014</i>   |
| Mailing Address<br><i>P.O. Box 1390</i>  |                    | Amount of Each Disbursement this Period<br><br><i>, 133.88</i>  |
| City<br><i>Athens</i>  | State<br><i>TN</i> |   |
| Zip Code<br><i>37371</i>   |                    | Category/<br>Type<br><i>004</i>   |
| Purpose of Disbursement<br><i>RADIO</i>  |                    |   |
| Candidate Name   |                    | Disbursement For:<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| Office Sought:<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> House<br><input type="checkbox"/> President | State: District:   |   |

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14021231193

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 29

|                                    |                                    |                                     |                                    |
|------------------------------------|------------------------------------|-------------------------------------|------------------------------------|
| <input type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |
|------------------------------------|------------------------------------|-------------------------------------|------------------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

*Finn for Senate*

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M D D Y Y Y Y  
*06 09 2014*

A.

*WYXI*

Mailing Address

*P.O. Box 1390*

City

*Athens*

State

*TN*

Zip Code

*37371*

Purpose of Disbursement

*Radio*

Amount of Each Disbursement this Period

*, 133.88*

Candidate Name

*004*  
Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M D D Y Y Y Y  
*06 24 2014*

B.

*WYXI*

Mailing Address

*P.O. Box 1390*

City

*Athens*

State

*TN*

Zip Code

*37371*

Purpose of Disbursement

*Radio*

Amount of Each Disbursement this Period

*, 133.88*

Candidate Name

*004*  
Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M D D Y Y Y Y  
*06 30 2014*

C.

*Regions Bank*

Mailing Address

*600 Poplar Ave*

City

*Memphis*

State

*TN*

Zip Code

*38120*

Purpose of Disbursement

*Fees*

Amount of Each Disbursement this Period

*, 46.50*

Candidate Name

*001*  
Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

*, 146,331.70*

14021231194

**SCHEDULE C (FEC Form 3)**

**LOANS**

|   |  |
|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE / OF /  |
|   | FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b |

NAME OF COMMITTEE (In Full)  
*Flinn For Senate*

|  |  |
|--|--|
| LOAN SOURCE Full Name (Last, First, Middle Initial)<br><i>Flinn, George S. Jr.</i> | Election:<br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br><i>472 Goodwyn Street</i>                                       |  |

|                        |                    |                          |
|------------------------|--------------------|--------------------------|
| City<br><i>Memphis</i> | State<br><i>TN</i> | ZIP Code<br><i>38111</i> |
|------------------------|--------------------|--------------------------|

|  |                            |  |
|--|----------------------------|--|
| Original Amount of Loan<br><i>1,805,250.00</i> | Cumulative Payment To Date | Balance Outstanding at Close of This Period<br><i>1,805,250.00</i> |
|--|----------------------------|--|

|       |                                    |                               |                                     |   |
|-------|------------------------------------|-------------------------------|-------------------------------------|---|
| TERMS | Date Incurred<br><i>04 25 2014</i> | Date Due<br><i>09 01 2014</i> | Interest Rate<br><i>0.00% (apr)</i> | Secured:<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|-------|------------------------------------|-------------------------------|-------------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|   |   |
|---|---|
| 1. Full Name (Last, First, Middle Initial)<br><i>Flinn, George S. Jr.</i> | Name of Employer<br><i>Self Employed</i>              |
| Mailing Address<br><i>472 Goodwyn Street</i>                              | Occupation<br><i>Physician</i>                        |
| City<br><i>Memphis</i>  | State<br><i>TN</i>                                    |
| ZIP Code<br><i>38111</i>  | Amount Guaranteed Outstanding:<br><i>1,805,250.00</i> |
| 2. Full Name (Last, First, Middle Initial)                                | Name of Employer                                      |
| Mailing Address   | Occupation  |
| City  | State   |
| ZIP Code  | Amount Guaranteed Outstanding:                        |
| 3. Full Name (Last, First, Middle Initial)                                | Name of Employer                                      |
| Mailing Address   | Occupation  |
| City  | State   |
| ZIP Code  | Amount Guaranteed Outstanding:                        |
| 4. Full Name (Last, First, Middle Initial)                                | Name of Employer                                      |
| Mailing Address   | Occupation  |
| City  | State   |
| ZIP Code  | Amount Guaranteed Outstanding:                        |

|   |   |                     |
|---|---|---------------------|
| SUBTOTALS This Period This Page (optional)...       | ▶ |                     |
| TOTALS This Period (last page in this line only)... | ▶ | <i>1,805,250.00</i> |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14021251195

**FEC FORM 3Z (File with Form 3)**  
**CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS**  
 (To Be Used By A Principal Campaign Committee)

|   |  |  |  |  |   |   |
|---|--|--|--|--|---|---|
| Name of Principal Campaign Committee (In Full)<br><i>Flinn For Senate</i> |  | Report Covering Period:<br>From: <i>04 01 2014</i> To: <i>06 30 2014</i>                               |  |  |   |   |
| Committee Name  |  | (a)<br>Line No. 11(a)<br>Total Contributions From<br>Indiv./Persons Other Than<br>Political Committees | (b)<br>Line No. 11(b)<br>Total Contributions<br>From Political Party<br>Committees |  |   |   |
| A   |  | <i>7,000.00</i>  | <i>0</i>   |  |   |   |
| B   | Column Total Last Page Only.....   | <i>7,000.00</i>  | <i>0</i>   |  |   |   |
|   | (c)<br>Line No. 11(c)<br>Total Contributions<br>From Other Political<br>Committees                     | (d)<br>Line No. 11(d)<br>Total Contributions<br>From The<br>Candidate                                  | (e)<br>Line No. 11(e)<br>Total<br>Contributions                                    | (f)<br>Line No. 12<br>Total Transfers<br>From Other Authorized<br>Committees     | (g)<br>Line No. 13(a)<br>Total Loans Made o<br>Guaranteed by<br>the Candidate           | (h)<br>Line No. 13(b)<br>Total All<br>Other Loans                                       |
| A   | <i>0</i>   | <i>0</i>   | <i>7,000.00</i>  | <i>0</i>   | <i>1,805,250.00</i>   | <i>0</i>  |
| B   | <i>0</i>   | <i>0</i>   | <i>7,000.00</i>  | <i>0</i>   | <i>1,805,250.00</i>   | <i>0</i>  |
|   | (i)<br>Line No. 13(c)<br>Total<br>Loans  | (j)<br>Line No. 14<br>Total Offsets to<br>Operating<br>Expenditures                                    | (k)<br>Line No. 15<br>Total<br>Other<br>Receipts                                   | (l)<br>Line No. 16<br>Total<br>Receipts  | (m)<br>Line No. 17<br>Total<br>Operating<br>Expenditures                                | (n)<br>Line No. 18<br>Total Transfers to<br>Other Authorized<br>Committees              |
| A   | <i>1,805,250.00</i>  | <i>0</i>   | <i>0</i>   | <i>1,812,250.00</i>  | <i>146,331.70</i>   | <i>0</i>  |
| B   | <i>1,805,250.00</i>  | <i>0</i>   | <i>0</i>   | <i>1,812,250.00</i>  | <i>146,331.70</i>   | <i>0</i>  |
|   | (o)<br>Line No. 19(a)<br>Total Loan Repayments<br>of Loans Made or<br>Guaranteed by The Can-<br>didate | (p)<br>Line No. 19(b)<br>Total Loan Repayments<br>of All Other Loans                                   | (q)<br>Line No. 19(c)<br>Total Loan<br>Repayments                                  | (r)<br>Line No. 20(a)<br>Total Contribution<br>Refunds to<br>Individuals/Persons | (s)<br>Line No. 20(b)<br>Total Contribution<br>Refunds to Political<br>Party Committees | (t)<br>Line No. 20(c)<br>Total Contribution<br>Refunds to Other<br>Political Committees |
| A   | <i>0</i>   | <i>0</i>   | <i>0</i>   | <i>0</i>   | <i>0</i>  | <i>0</i>  |
| B   | <i>0</i>   | <i>0</i>   | <i>0</i>   | <i>0</i>   | <i>0</i>  | <i>0</i>  |
|   | (u)<br>Line No. 20(d)<br>Total<br>Contributor<br>Refunds   | (v)<br>Line No. 21<br>Total Other<br>Disbursements   | (w)<br>Line No. 22<br>Total<br>Disbursements                                       | (x)<br>Line No. 23<br>Cash on Hand<br>Beginning of<br>Reporting Period           | (y)<br>Line No. 27<br>Cash on Hand<br>Close of<br>Reporting Period                      | (z)<br>Line No. 9<br>Debts & Obligations<br>Owed TO the<br>Committee                    |
| A   | <i>0</i>   | <i>0</i>   | <i>146,331.70</i>  | <i>0</i>   | <i>1,665,918.30</i>   | <i>0</i>  |
| B   | <i>0</i>   | <i>0</i>   | <i>146,331.70</i>  | <i>0</i>   | <i>1,665,918.30</i>   | <i>0</i>  |
|   | (aa)<br>Line No. 10<br>Debts & Obligations<br>Owed BY the<br>Committee                                 | (bb)<br>Line No. 6(c)<br>Net Contributions   | (cc)<br>Line No. 7(c)<br>Net Operating<br>Expenditures                             |  |   |   |
| A   | <i>1,805,250.00</i>  | <i>7,000.00</i>  | <i>146,331.70</i>  |  |   |   |
| B   | <i>1,805,250.00</i>  | <i>7,000.00</i>  | <i>146,331.70</i>  |  |   |   |

14021251196

SCREENED  
BY THE SENATE  
POST OFFICE  
STANDARD MAIL B

Secretary of the Senate  
Office of Public Records  
P.O. Box 775778  
Washington, DC 20013-7578



USPS TRACKING #



9114 9012 3080 3200 4221 22

Label 400 Jan. 2013  
7690-16-000-7948

76115212091

8/17

OPENED  
U.S. SENATE  
POST OFFICE  
STANDARD MAIL B

Secretary of the Senate  
Office of Public Records  
P.O. Box 77578  
Washington, DC 20013-7578



1002



2013

U.S. POSTAGE  
PAID  
MEMPHIS, TN  
NOV 25 2014  
PM/OLINT

\$5.87

00038664-24

08115217041



# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_

Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

**11/25/14**

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DHL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

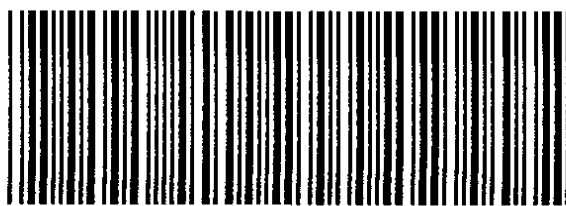
PREPARER

**MN**

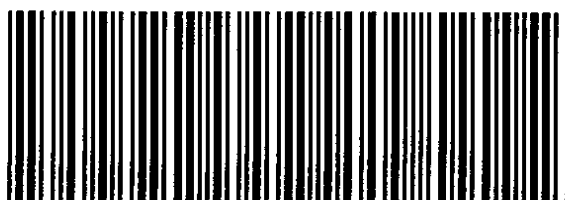
DATE PREPARED

**12/2/14**

14021251199



SEN PATCH



SEN PATCH

14021251200