

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

13 OCT 22 AM 10:48

Office Use Only

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

ADDRESS (number and street) PO BOX 192
Check if different than previously reported. (ACC) LASCASSAS TN 37085

2. FEC IDENTIFICATION NUMBER C C00541904
3. IS THIS REPORT X NEW OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
TN 04

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
April 15 Quarterly Report (Q1)
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 M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 07 01 2013 through 09 30 2013

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 Nate Schott
Signature of Treasurer Nate Schott Date 10 15 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 8 columns for Office Use Only

FEC FORM 3 (Revised 02/2003)

13020495179

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 31

Write or Type Committee Name

JOE CARR FOR SENATE

Report Covering the Period:

From:

^M ^M / ^D ^D / ^Y ^Y ^Y ^Y
07 / 01 / 2013

To:

^M ^M / ^D ^D / ^Y ^Y ^Y ^Y
09 / 30 / 2013

13020495180

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 31

Write or Type Committee Name

JOE CARR FOR SENATE

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 07 01 2013 To: ^{M M / D D / Y Y Y Y} 09 30 2013

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	39210.00	326610.00
(ii) Unitemized.....	12791.98	20345.98
(iii) TOTAL of contributions from individuals ▶	52001.98	346955.98
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	275.00	11025.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	52276.98	357980.98
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	52276.98	357980.98

13020495181

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 31

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40778.03	71473.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1000.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1000.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	41778.03	72473.75

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	275008.28
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	52276.98
25. SUBTOTAL (add Line 23 and Line 24).....	327285.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41778.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	285507.23

13020495182

**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 5 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) Stuart Anderson			Date of Receipt M - M / D - D / Y - Y - Y - Y 09 / 12 / 2013	
A. Mailing Address 101 Gillespie Dr. Apt 13304			Transaction ID : SA11A1.5220	
City Franklin	State TN	Zip Code 37067	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self Employed		Occupation Investments		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) Carl G. Britt Jr.			Date of Receipt M - M / D - D / Y - Y - Y - Y 08 / 20 / 2013	
B. Mailing Address 1807 Iroquois Court			Transaction ID : SA11A1.5220	
City	State	Zip Code		

13020495183

**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 6 OF 31

<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	

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

A. Full Name (Last, First, Middle Initial) Steve Bumpus			Date of Receipt M M / D D / Y Y Y Y 09 28 2013	
Mailing Address 13880 Autrey Rd.			Transaction ID : SA11AI.5133	
City Silver Point	State TN	Zip Code 38582	Amount of Each Receipt this Period \$, , 100.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$, , 300.00	
Name of Employer Tillman Companies		Occupation Field Superintendant	Election Cycle-to-Date \$, ,	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 300.00		
B. Full Name (Last, First, Middle Initial) Dennis Clark			Date of Receipt M M / D D / Y Y Y Y 09 30 2013	
Mailing Address 260 Winding Creek Dr.			Transaction ID : SA11AI.5415	
City Oakland	State TN	Zip Code 38060	Amount of Each Receipt this Period \$, , 250.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$, , 250.00	
Name of Employer Retired		Occupation Retired	Election Cycle-to-Date \$, , 250.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 250.00		
C. Full Name (Last, First, Middle Initial) Chris Coats			Date of Receipt M M / D D / Y Y Y Y 09 14 2013	
Mailing Address 313 Enon Springs Rd.			Transaction ID : SA11AI.5167	
City Smyrna	State TN	Zip Code 37167	Amount of Each Receipt this Period \$, , 250.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$, , 250.00	
Name of Employer self employed		Occupation attorney	Election Cycle-to-Date \$, , 250.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 250.00		
SUBTOTAL of Receipts This Page (optional).....			\$, , 600.00	
TOTAL This Period (last page this line number only).....			\$, ,	

13020495184

**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 7 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) Chris Coats			Date of Receipt M M / D D / Y Y Y Y 09 28 2013	
Mailing Address 313 Enon Springs Rd.			Transaction ID : SA11AI.5098	
City Smyrna	State TN	Zip Code 37167	Amount of Each Receipt this Period \$, , 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer self employed		Occupation attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	\$, , 1250.00	

Full Name (Last, First, Middle Initial) Jeff & Julie Cook			Date of Receipt M M / D D / Y Y Y Y 09 09 2013	
Mailing Address 1615 Edgewater Court			Transaction ID : SA11AI.5225	
City Franklin	State TN	Zip Code 37069	Amount of Each Receipt this Period \$, , 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Williamson Co. Medical Center		Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	\$, , 250.00	

Full Name (Last, First, Middle Initial) Robert Davidson			Date of Receipt M M / D D / Y Y Y Y 07 10 2013	
Mailing Address 1608 Tyne Blvd.			Transaction ID : SA11AI.5332	
City Nashville	State TN	Zip Code 37215	Amount of Each Receipt this Period \$, , 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer DGLF CPAs & Business Advisors		Occupation CPA		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	\$, , 500.00	

SUBTOTAL of Receipts This Page (optional).....			\$, , 1750.00	
TOTAL This Period (last page this line number only).....			\$, ,	

13020495185

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 8 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Doe Dayton			Date of Receipt M M / D D / Y Y Y Y 09 12 2013	
Mailing Address 2337 Murfreesboro			Transaction ID : SA11AI.5114	
City Nashville	State TN	Zip Code 37217	Amount of Each Receipt this Period \$, , 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Nashboro Tire Center		Occupation S B Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	250.00	

Full Name (Last, First, Middle Initial) B. Paul Dillon			Date of Receipt M M / D D / Y Y Y Y 09 30 2013	
Mailing Address 121 Langston Ct.			Transaction ID : SA11AI.5200	
City Murfreesboro	State TN	Zip Code 37128	Amount of Each Receipt this Period \$, , 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer The Dillon Agency		Occupation Detective		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	250.00	

Full Name (Last, First, Middle Initial) C. Geoff Dougal			Date of Receipt M M / D D / Y Y Y Y 09 13 2013	
Mailing Address 201 Wine			Transaction ID : SA11AI.5165	
City Blountville	State TN	Zip Code 37617	Amount of Each Receipt this Period \$, , 300.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Eastman		Occupation Factory Worker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	300.00	

SUBTOTAL of Receipts This Page (optional).....			800.00	
TOTAL This Period (last page this line number only).....				

13020495186

**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 9 OF 31

<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	

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Barbara Evans			Date of Receipt M M / D D / Y Y Y Y 09 04 2013		
Mailing Address 155 Cumberland Dr.			Transaction ID : SA11AI.4983		
City Hendersonville	State TN	Zip Code 37075	Amount of Each Receipt this Period , . 2600.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , . 2600.00		
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period , . 2600.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , . 2600.00	Amount of Each Receipt this Period , . 2600.00		
Full Name (Last, First, Middle Initial) B. Barbara Evans			Date of Receipt M M / D D / Y Y Y Y 09 04 2013		
Mailing Address 155 Cumberland Dr.			Transaction ID : SA11AI.4984		
City Hendersonville	State TN	Zip Code 37075	Amount of Each Receipt this Period , . 2400.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , . 2400.00		
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period , . 2400.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , . 5000.00	Amount of Each Receipt this Period , . 2400.00		
Full Name (Last, First, Middle Initial) C. John Evans			Date of Receipt M M / D D / Y Y Y Y 09 04 2013		
Mailing Address 155 Cumberland Dr.			Transaction ID : SA11AI.4982		
City Hendersonville	State TN	Zip Code 37075	Amount of Each Receipt this Period , . 2600.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , . 2600.00		
Name of Employer New Generation Insurance		Occupation Owner	Amount of Each Receipt this Period , . 2600.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , . 2600.00	Amount of Each Receipt this Period , . 2600.00		
SUBTOTAL of Receipts This Page (optional).....			, . 7600.00		
TOTAL This Period (last page this line number only).....			, .		

13020495187

**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 10 OF 31

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

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

A. Full Name (Last, First, Middle Initial) John Evans			Date of Receipt M M / D D / Y Y Y Y 09 04 2013	
Mailing Address 155 Cumberland Dr.			Transaction ID : SA11AI.4985	
City Hendersonville	State TN	Zip Code 37075	Amount of Each Receipt this Period , , 2400.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 2400.00	
Name of Employer New Generation Insurance		Occupation Owner	Amount of Each Receipt this Period , , 2400.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 5000.00		
B. Full Name (Last, First, Middle Initial) Harding Fox			Date of Receipt M M / D D / Y Y Y Y 09 06 2013	
Mailing Address Requested			Transaction ID : SA11AI.5223	
City Murfreesboro	State TN	Zip Code 37130	Amount of Each Receipt this Period , , 1500.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 1500.00	
Name of Employer Self Employed		Occupation Business Owner	Amount of Each Receipt this Period , , 1500.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 1500.00		
C. Full Name (Last, First, Middle Initial) Lawrence Freund			Date of Receipt M M / D D / Y Y Y Y 09 16 2013	
Mailing Address 309 Deerwood Ln.			Transaction ID : SA11AI.5168	
City Brentwood	State TN	Zip Code 37027	Amount of Each Receipt this Period , , 500.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , 500.00	
Name of Employer Self-Employed		Occupation Physician	Amount of Each Receipt this Period , , 500.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date , , 500.00		
SUBTOTAL of Receipts This Page (optional).....			, , 4400.00	
TOTAL This Period (last page this line number only).....			, ,	

13020495188

**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 11 OF 31
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Henry Golczynski			Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2013
Mailing Address 2805 Waywood			Transaction ID : SA11AI.5108
City Murfreesboro	State TN	Zip Code 37128	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Franklin's Printing	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Dennis Gros			Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2013
Mailing Address 1755 Warren Hollow Rd.			Transaction ID : SA11AI.5423
City Nolensville	State TN	Zip Code 37135	Amount of Each Receipt this Period 110.00
FEC ID number of contributing federal political committee. C			
Name of Employer Executive Recruiters	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 210.00		

Full Name (Last, First, Middle Initial) C. Jenean Hampton			Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2013
Mailing Address 820 Mooreland Dr.			Transaction ID : SA11AI.4915
City Bowling Green	State KY	Zip Code 42103	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Bowling Green Southern KY Tea	Occupation Chairman		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	610.00
TOTAL This Period (last page this line number only).....	

13020495189

**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 12 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) Brett Henley			Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2013	
Mailing Address 400 Willowbrook Dr.			Transaction ID : SA11AI.5337	
City Manchester	State TN	Zip Code 37335	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Henley Propane Inc.		Occupation Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) Burl Hiles			Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2013	
Mailing Address 203 Flower Ln.			Transaction ID : SA11AI.5317	
City Estill Springs	State TN	Zip Code 37330	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Burl's Termite and Pest		Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) Davis Hunt			Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2013	
Mailing Address 2604 Tyne Blvd.			Transaction ID : SA11AI.4920	
City Nashville	State TN	Zip Code 37215	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Continental Equity Corporation		Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....			1750.00	
TOTAL This Period (last page this line number only).....				

13020495190

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 13 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) Reba Johnson			Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2013	
A. Mailing Address 1301 Moran Rd.			Transaction ID : SA11AI.5419	
City Franklin	State TN	Zip Code 37069	Amount of Each Receipt this Period \$, , 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Homemaker		Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	\$, , 2600.00	

Full Name (Last, First, Middle Initial) Willis Johnson			Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2013	
B. Mailing Address 1301 Moran Rd.			Transaction ID : SA11AI.5418	
City Franklin	State TN	Zip Code 37069	Amount of Each Receipt this Period \$, , 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Copart Inc.		Occupation Founder and Chairman		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	\$, , 2600.00	

Full Name (Last, First, Middle Initial) Wayne Keegan			Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2013	
C. Mailing Address 448 Autumn Lake			Transaction ID : SA11AI.5190	
City Franklin	State TN	Zip Code 37067	Amount of Each Receipt this Period \$, , 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer The Ingram Content Group		Occupation Chief HR Officer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	\$, , 500.00	

SUBTOTAL of Receipts This Page (optional).....			\$, , 5700.00	
TOTAL This Period (last page this line number only).....			\$, , .	

13020495191

**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 14 OF 31
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) Brian K Lee			Date of Receipt M M / D D / Y Y Y Y 09 06 2013		
Mailing Address 7745 Luz De Camino			Transaction ID : SA11AI.5229		
City El Paso	State TX	Zip Code 79912	Amount of Each Receipt this Period \$, , 500.00		
FEC ID number of contributing federal political committee. C			Name of Employer Texas Tech University		
Name of Employer Texas Tech University			Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 500.00			

Full Name (Last, First, Middle Initial) Fred Lovelace			Date of Receipt M M / D D / Y Y Y Y 08 23 2013		
Mailing Address PO. Box 776			Transaction ID : SA11AI.5246		
City Murfreesboro	State TN	Zip Code 37133	Amount of Each Receipt this Period \$, , 1000.00		
FEC ID number of contributing federal political committee. C			Name of Employer Retired		
Name of Employer Retired			Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 1250.00			

Full Name (Last, First, Middle Initial) Renee Mathis			Date of Receipt M M / D D / Y Y Y Y 09 06 2013		
Mailing Address 617 Cooks Hill Rd.			Transaction ID : SA11AI.5215		
City Mount Juliet	State TN	Zip Code 37122	Amount of Each Receipt this Period \$, , 2500.00		
FEC ID number of contributing federal political committee. C			Name of Employer Homemaker		
Name of Employer Homemaker			Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 2500.00			

SUBTOTAL of Receipts This Page (optional).....			\$, , 4000.00		
TOTAL This Period (last page this line number only).....			\$, , .		

13020495192

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 15 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) Malinda McCool			Date of Receipt M M / D D / Y Y Y Y 08 24 2013	
A. Mailing Address 5594 Heather Oak Dr.			Transaction ID : SA11AI.4934	
City Arlington	State TN	Zip Code 38002	Amount of Each Receipt this Period \$, , 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer CBRE		Occupation Assistant Real Estate Controller		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 1000.00		

Full Name (Last, First, Middle Initial) Gary McNabb			Date of Receipt M M / D D / Y Y Y Y 09 20 2013	
B. Mailing Address PO Box 939			Transaction ID : SA11AI.5421	
City Cookeville	State TN	Zip Code 38901	Amount of Each Receipt this Period \$, , 2500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Cash Express		Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 2500.00		

Full Name (Last, First, Middle Initial) Kathy Montgomery			Date of Receipt M M / D D / Y Y Y Y 09 06 2013	
C. Mailing Address 4613 S Mount Juliet Rd.			Transaction ID : SA11AI.5219	
City Hermitage	State TN	Zip Code 37076	Amount of Each Receipt this Period \$, , 2500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Homemaker		Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 2500.00		

SUBTOTAL of Receipts This Page (optional).....			\$, , 6000.00	
TOTAL This Period (last page this line number only).....			\$, , .	

13020495193

**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 16 OF 31
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) J. Netterville			Date of Receipt M M / D D / Y Y Y Y 08 23 2013		
Mailing Address 2649 N. Berry Chapel Rd.			Transaction ID : SA11AI.4941		
City Brentwood	State TN	Zip Code 37027	Amount of Each Receipt this Period \$ 250.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Cardiovascular Anesthesiologis		Occupation Doctor/Partner			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ 250.00			

Full Name (Last, First, Middle Initial) Mark Paradies			Date of Receipt M M / D D / Y Y Y Y 09 30 2013		
Mailing Address 238 S. Peters Rd. Suite 301			Transaction ID : SA11AI.5147		
City Knoxville	State TN	Zip Code 37923	Amount of Each Receipt this Period \$ 500.00		
FEC ID number of contributing federal political committee. C					
Name of Employer System Improvements		Occupation President			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ 500.00			

Full Name (Last, First, Middle Initial) Kristopher T. Parkhurst			Date of Receipt M M / D D / Y Y Y Y 09 03 2013		
Mailing Address 7616 Dismal Hollow Rd.			Transaction ID : SA11AI.4945		
City Christiana	State TN	Zip Code 37037	Amount of Each Receipt this Period \$ 100.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Self Employed		Occupation CPA			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ 350.00			

SUBTOTAL of Receipts This Page (optional).....			\$ 850.00		
TOTAL This Period (last page this line number only).....			\$		

13020495194

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 17 OF 31

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

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

A. Full Name (Last, First, Middle Initial) James Peach			Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2013	
Mailing Address 10 East Main St.			Transaction ID : SA11AI.5118	
City Camden	State TN	Zip Code 38320	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00	
Name of Employer American Shell Company		Occupation Merchant	Amount of Each Receipt this Period 1000.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
B. Full Name (Last, First, Middle Initial) Jean Powell			Date of Receipt M M / D D / Y Y Y Y 08 / 23 / 2013	
Mailing Address 2097 Nashville Hwy			Transaction ID : SA11AI.5238	
City Columbia	State TN	Zip Code 38401	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00	
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period 250.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) Don Rollins			Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2013	
Mailing Address 212 Woodford Pl.			Transaction ID : SA11AI.4954	
City Nashville	State TN	Zip Code 37215	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00	
Name of Employer Rollins Associates		Occupation Real Estate/President	Amount of Each Receipt this Period 250.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....			1500.00	
TOTAL This Period (last page this line number only).....			1500.00	

13020495195

**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 18 OF 31
	<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	

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

A. Full Name (Last, First, Middle Initial) Matt Studd			Date of Receipt M M / D D / Y Y Y Y 09 30 2013		
Mailing Address Requested			Transaction ID : SA11AI.5354		
City	State	Zip Code	Amount of Each Receipt this Period		
Woodbury	TN	37190	, , 250.00		
FEC ID number of contributing federal political committee. C			, , 250.00		
Name of Employer Cassens Transport Co		Occupation Assistant Fire Chief	, , 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 250.00		

B. Full Name (Last, First, Middle Initial) Brad Williams			Date of Receipt M M / D D / Y Y Y Y 09 25 2013		
Mailing Address 4312 Belle Mina Lane			Transaction ID : SA11AI.5199		
City	State	Zip Code	Amount of Each Receipt this Period		
Franklin	TN	37135	, , 250.00		
FEC ID number of contributing federal political committee. C			, , 250.00		
Name of Employer Bradley Coatings, Inc.		Occupation President	, , 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 250.00		

C. Full Name (Last, First, Middle Initial) Brent Willis			Date of Receipt M M / D D / Y Y Y Y 08 21 2013		
Mailing Address 405 Hunterwood Ct.			Transaction ID : SA11AI.4976		
City	State	Zip Code	Amount of Each Receipt this Period		
Brentwood	TN	37027	, , 250.00		
FEC ID number of contributing federal political committee. C			, , 250.00		
Name of Employer Volatility		Occupation Founder/CEO	, , 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	, , 250.00		

SUBTOTAL of Receipts This Page (optional).....	, , 750.00
TOTAL This Period (last page this line number only).....	, , 39210.00

13020495196

**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 19 OF 31

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) Draft Newt PAC			Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2013		
Mailing Address 717 King St. Ste 300			Transaction ID : SA11C.5430		
City Alexandria	State VA	Zip Code 22314	Amount of Each Receipt this Period \$, , 25.00		
FEC ID number of contributing federal political committee. C					
Name of Employer		Occupation			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 25.00			

Full Name (Last, First, Middle Initial) Waller Lansden PAC			Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2013		
Mailing Address 511 Union St. Ste 2700			Transaction ID : SA11C.5341		
City Nashville	State TN	Zip Code 37219	Amount of Each Receipt this Period \$, , 250.00		
FEC ID number of contributing federal political committee. C					
Name of Employer		Occupation			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 250.00			

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

SUBTOTAL of Receipts This Page (optional).....	\$, , 275.00
TOTAL This Period (last page this line number only).....	\$, , 275.00

13020495197

**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 31

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

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Maddie Carr		Date of Disbursement M - M / D D / Y Y Y Y 09 11 2013
Mailing Address 370 Oakley Dr. 612		Amount of Each Disbursement this Period \$ 500.00 Transaction ID : SB17.5270
City Nashville	State TN	
Purpose of Disbursement Operations	Zip Code 37211	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Holiday Inn		Date of Disbursement M - M / D D / Y Y Y Y 09 28 2013
Mailing Address 2 Orr Ct.		Amount of Each Disbursement this Period \$ 130.80 Transaction ID : SB17.5303
City Johnson City	State TN	
Purpose of Disbursement Lodging	Zip Code 37615	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Navigation Advertising		Date of Disbursement M - M / D D / Y Y Y Y 07 19 2013
Mailing Address 416-B Medical Center Parkway		Amount of Each Disbursement this Period \$ 500.00 Transaction ID : SB17.5362
City Murfreesboro	State TN	
Purpose of Disbursement Advertising/Media	Zip Code 37129	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	\$ 1130.80
TOTAL This Period (last page this line number only).....	\$

13020495198

**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 21 OF 31

<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

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Navigation Advertising		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013
Mailing Address 416-B Medical Center Parkway		Amount of Each Disbursement this Period \$ 2500.00 Transaction ID : SB17.5363
City Murfreesboro	State TN	
Purpose of Disbursement Advertising/Media		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Navigation Advertising		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2013
Mailing Address 416-B Medical Center Parkway		Amount of Each Disbursement this Period \$ 750.00 Transaction ID : SB17.5370
City Murfreesboro	State TN	
Purpose of Disbursement Advertising/Media		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2013
Mailing Address 620 Ridgley Rd.		Amount of Each Disbursement this Period \$ 985.51 Transaction ID : SB17.5267
City Murfreesboro	State TN	
Purpose of Disbursement Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)..... 4235.51
TOTAL This Period (last page this line number only).....

13020495199

**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 31

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Pinnacle Bank		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2013
Mailing Address 114 West College St.		Amount of Each Disbursement this Period 100.47 Transaction ID : SB17.5348
City Murfreesboro	State TN	
Zip Code 37130	Purpose of Disbursement Bank charges	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	
Full Name (Last, First, Middle Initial) B. Pinnacle Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2013
Mailing Address 114 West College St.		Amount of Each Disbursement this Period 28.87 Transaction ID : SB17.5389
City Murfreesboro	State TN	
Zip Code 37130	Purpose of Disbursement Bank Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	
Full Name (Last, First, Middle Initial) C. Pinnacle Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2013
Mailing Address 114 West College St.		Amount of Each Disbursement this Period 15.00 Transaction ID : SB17.5404
City Murfreesboro	State TN	
Zip Code 37130	Purpose of Disbursement Bank Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	
SUBTOTAL of Disbursements This Page (optional).....		144.34
TOTAL This Period (last page this line number only).....		

13020495200

**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 31

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

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Putnam County GOP		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2013
Mailing Address 406 E Broad St.		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.5360
City Cookeville	State TN	
Zip Code 38501	Purpose of Disbursement	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. S & S Strategies LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013
Mailing Address PO Box 58804		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.5399
City Nashville	State TN	
Zip Code 37205	Purpose of Disbursement Political Strategy Consulting	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. S & S Strategies LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2013
Mailing Address PO Box 58804		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.5401
City Nashville	State TN	
Zip Code 37205	Purpose of Disbursement Political Strategy Consulting	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9250.00
TOTAL This Period (last page this line number only).....	

13020495201

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 31

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 19 2013
Mailing Address Requested		Amount of Each Disbursement this Period 1245.38
City Nashville	State TN	Zip Code 37211
Purpose of Disbursement Travel Reimbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5453
State: District:		

Full Name (Last, First, Middle Initial) B. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 19 2013
Mailing Address Requested		Amount of Each Disbursement this Period 374.30
City Nashville	State TN	Zip Code 37211
Purpose of Disbursement Transportation/Plane Ticket	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5454 [MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 19 2013
Mailing Address Requested		Amount of Each Disbursement this Period 374.30
City Nashville	State TN	Zip Code 37211
Purpose of Disbursement Transportation/Plane Ticket	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5456 [MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	\$	\$	1245.38
TOTAL This Period (last page this line number only).....	\$	\$.

13020495202

**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 31

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

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

<p>Full Name (Last, First, Middle Initial) A. John Saltsman</p> <p>Mailing Address Requested</p> <p>City Nashville State TN Zip Code 37211</p> <p>Purpose of Disbursement Transportation/Taxi</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: District:</p>	<p>Date of Disbursement M M / D D / Y Y Y Y 07 19 2013</p> <p>Amount of Each Disbursement this Period 12.00</p> <p>Transaction ID : SB17.5457</p> <p>[MEMO ITEM]</p>
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<p>Full Name (Last, First, Middle Initial) B. John Saltsman</p> <p>Mailing Address Requested</p> <p>City Nashville State TN Zip Code 37211</p> <p>Purpose of Disbursement Transportation/Taxi</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: District:</p>	<p>Date of Disbursement M M / D D / Y Y Y Y 07 19 2013</p> <p>Amount of Each Disbursement this Period 16.00</p> <p>Transaction ID : SB17.5460</p> <p>[MEMO ITEM]</p>
--	--

<p>Full Name (Last, First, Middle Initial) C. John Saltsman</p> <p>Mailing Address Requested</p> <p>City Nashville State TN Zip Code 37211</p> <p>Purpose of Disbursement Transportation/Taxi</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: District:</p>	<p>Date of Disbursement M M / D D / Y Y Y Y 07 19 2013</p> <p>Amount of Each Disbursement this Period 19.61</p> <p>Transaction ID : SB17.5461</p> <p>[MEMO ITEM]</p>
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<p>SUBTOTAL of Disbursements This Page (optional).....</p> <p>TOTAL This Period (last page this line number only).....</p>	<p>0.00</p>
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13020495203

**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 26 OF 31

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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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)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013
Mailing Address Requested		Amount of Each Disbursement this Period \$, , 28.04 Transaction ID : SB17.5462 [MEMO ITEM]
City Nashville	State TN	
Zip Code 37211	Purpose of Disbursement Transportation/Taxi	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013
Mailing Address Requested		Amount of Each Disbursement this Period \$, , 228.08 Transaction ID : SB17.5463 [MEMO ITEM]
City Nashville	State TN	
Zip Code 37211	Purpose of Disbursement Travel/Lodging	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013
Mailing Address Requested		Amount of Each Disbursement this Period \$, , 193.05 Transaction ID : SB17.5466 [MEMO ITEM]
City Nashville	State TN	
Zip Code 37211	Purpose of Disbursement Travel/Mileage - 351 Miles	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	\$, , 0.00
TOTAL This Period (last page this line number only).....	\$, , .

13020495204

**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 27 OF 31

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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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)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Thomas Smith		Date of Disbursement M M / D D / Y Y Y Y 07 01 2013	
Mailing Address 4533 Shy's Hill Rd.		Amount of Each Disbursement this Period 3500.00	
City Nashville	State TN	Zip Code 37215	Transaction ID : SB17.5343
Purpose of Disbursement Fundraising Expense		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Thomas Smith		Date of Disbursement M M / D D / Y Y Y Y 07 25 2013	
Mailing Address 4533 Shy's Hill Rd.		Amount of Each Disbursement this Period 3500.00	
City Nashville	State TN	Zip Code 37215	Transaction ID : SB17.5368
Purpose of Disbursement Fundraising Expense		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. Thomas Smith		Date of Disbursement M M / D D / Y Y Y Y 08 27 2013	
Mailing Address 4533 Shy's Hill Rd.		Amount of Each Disbursement this Period 5250.00	
City Nashville	State TN	Zip Code 37215	Transaction ID : SB17.5396
Purpose of Disbursement Fundraising Expense		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	12250.00
TOTAL This Period (last page this line number only).....	

13020495205

**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 28 OF 31

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

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial)

A. Tennessee Young Republicans

Date of Disbursement

M M / D D / Y Y Y Y
09 19 2013

Mailing Address 2424 21st Ave
Ste 200

City Nashville State TN Zip Code 37212

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5357

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Triton Communication

Date of Disbursement

M M / D D / Y Y Y Y
08 13 2013

Mailing Address 663 Brea Canyon Rd.
Ste A

City Walnut State CA Zip Code 91789

Amount of Each Disbursement this Period

2349.00

Transaction ID : SB17.5391

Purpose of Disbursement
Media/Internet

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Troy Brewer CPA Inc.

Date of Disbursement

M M / D D / Y Y Y Y
07 01 2013

Mailing Address 6213 Charlotte Ave.
Suite 112

City Nashville State TN Zip Code 37209

Amount of Each Disbursement this Period

1200.00

Transaction ID : SB17.5344

Purpose of Disbursement
Compliance/Accounting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

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

4049.00

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

13020495206

**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 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Troy Brewer CPA Inc.		Date of Disbursement MM / DD / YYYY 08 / 02 / 2013
Mailing Address 6213 Charlotte Ave. Suite 112		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.5369
City Nashville	State TN Zip Code 37209	
Purpose of Disbursement Compliance	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Troy Brewer CPA Inc.		Date of Disbursement MM / DD / YYYY 08 / 27 / 2013
Mailing Address 6213 Charlotte Ave. Suite 112		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.5397
City Nashville	State TN Zip Code 37209	
Purpose of Disbursement Compliance	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Justin T. Wax		Date of Disbursement MM / DD / YYYY 09 / 20 / 2013
Mailing Address 3022 Rollen Rd.		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5359
City Murfreesboro	State TN Zip Code 37130	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4400.00
TOTAL This Period (last page this line number only).....	

13020495207

**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 30 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 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)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Wax Family Printing		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013	
Mailing Address 215 MTCS Dr.		Amount of Each Disbursement this Period \$ 1889.06 Transaction ID : SB17.5346	
City Murfreesboro	State TN		Zip Code 37129
Purpose of Disbursement	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District			

Full Name (Last, First, Middle Initial) B. Wax Family Printing		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013	
Mailing Address 215 MTCS Dr.		Amount of Each Disbursement this Period \$ 383.70 Transaction ID : SB17.5398	
City Murfreesboro	State TN		Zip Code 37129
Purpose of Disbursement Printing	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Disbursement this Period	
City	State		Zip Code
Purpose of Disbursement	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District			

SUBTOTAL of Disbursements This Page (optional)	\$ 2272.76
TOTAL This Period (last page this line number only)	\$ 38977.79

13020495208

**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 31 OF 31

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" 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)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Karen Hudson		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013
Mailing Address 2010 Stratford Rd.		Amount of Each Disbursement this Period \$, , 1000.00 Transaction ID : SB20A.5451
City Murfreesboro	State TN	
Purpose of Disbursement Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period \$, , .
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period \$, , .
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	\$, , 1000.00
TOTAL This Period (last page this line number only).....	\$, , 1000.00

13020495209

**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 31

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Putnam County GOP		Date of Disbursement M M / D D / Y Y Y Y 09 27 2013
Mailing Address 406 E Broad St.		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.5360
City Cookeville	State TN	
Zip Code 38501		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. S & S Strategies LLC		Date of Disbursement M M / D D / Y Y Y Y 08 27 2013
Mailing Address PO Box 58804		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.5399
City Nashville	State TN	
Zip Code 37205		Category/ Type
Purpose of Disbursement Political Strategy Consulting		
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. S & S Strategies LLC		Date of Disbursement M M / D D / Y Y Y Y 09 06 2013
Mailing Address PO Box 58804		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.5401
City Nashville	State TN	
Zip Code 37205		Category/ Type
Purpose of Disbursement Political Strategy Consulting		
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional)..... 9250.00

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

13020495210

**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 31

<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

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address Requested		Amount of Each Disbursement this Period 1245.38 Transaction ID : SB17.5453	
City Nashville	State TN		Zip Code 37211
Purpose of Disbursement Travel Reimbursement			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address Requested		Amount of Each Disbursement this Period 374.30 Transaction ID : SB17.5454 [MEMO ITEM]	
City Nashville	State TN		Zip Code 37211
Purpose of Disbursement Transportation/Plane Ticket			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address Requested		Amount of Each Disbursement this Period 374.30 Transaction ID : SB17.5456 [MEMO ITEM]	
City Nashville	State TN		Zip Code 37211
Purpose of Disbursement Transportation/Plane Ticket			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	1245.38
TOTAL This Period (last page this line number only).....	

13020495211

**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 31

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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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)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. John Saltzman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address Requested		Amount of Each Disbursement this Period \$ 12.00 Transaction ID : SB17.5457 [MEMO ITEM]	
City Nashville	State TN		Zip Code 37211
Purpose of Disbursement Transportation/Taxi			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. John Saltzman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address Requested		Amount of Each Disbursement this Period \$ 16.00 Transaction ID : SB17.5460 [MEMO ITEM]	
City Nashville	State TN		Zip Code 37211
Purpose of Disbursement Transportation/Taxi			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. John Saltzman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address Requested		Amount of Each Disbursement this Period \$ 19.61 Transaction ID : SB17.5461 [MEMO ITEM]	
City Nashville	State TN		Zip Code 37211
Purpose of Disbursement Transportation/Taxi			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	.

13020495212

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address Requested		Amount of Each Disbursement this Period 28.04 Transaction ID : SB17.5462 [MEMO ITEM]	
City Nashville	State TN		Zip Code 37211
Purpose of Disbursement Transportation/Taxi	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address Requested		Amount of Each Disbursement this Period 228.08 Transaction ID : SB17.5463 [MEMO ITEM]	
City Nashville	State TN		Zip Code 37211
Purpose of Disbursement Travel/Lodging	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. John Saltsman		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2013	
Mailing Address Requested		Amount of Each Disbursement this Period 193.05 Transaction ID : SB17.5466 [MEMO ITEM]	
City Nashville	State TN		Zip Code 37211
Purpose of Disbursement Travel/Mileage - 351 Miles	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

13020495213

**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 27 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Thomas Smith		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013	
Mailing Address 4533 Shy's Hill Rd.		Amount of Each Disbursement this Period \$ 3500.00 Transaction ID : SB17.5343	
City Nashville	State TN		Zip Code 37215
Purpose of Disbursement Fundraising Expense	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District			

Full Name (Last, First, Middle Initial) B. Thomas Smith		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2013	
Mailing Address 4533 Shy's Hill Rd.		Amount of Each Disbursement this Period \$ 3500.00 Transaction ID : SB17.5368	
City Nashville	State TN		Zip Code 37215
Purpose of Disbursement Fundraising Expense	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District			

Full Name (Last, First, Middle Initial) C. Thomas Smith		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013	
Mailing Address 4533 Shy's Hill Rd.		Amount of Each Disbursement this Period \$ 5250.00 Transaction ID : SB17.5396	
City Nashville	State TN		Zip Code 37215
Purpose of Disbursement Fundraising Expense	Candidate Name		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District			

SUBTOTAL of Disbursements This Page (optional).....	\$ 12250.00
TOTAL This Period (last page this line number only).....	

13020495214

**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 28 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Tennessee Young Republicans		Date of Disbursement MM / DD / YYYY 09 / 19 / 2013
Mailing Address 2424 21st Ave Ste 200		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5357
City Nashville	State TN Zip Code 37212	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Triton Communication		Date of Disbursement MM / DD / YYYY 08 / 13 / 2013
Mailing Address 663 Brea Canyon Rd. Ste A		Amount of Each Disbursement this Period 2349.00 Transaction ID : SB17.5391
City Walnut	State CA Zip Code 91789	
Purpose of Disbursement Media/Internet		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Troy Brewer CPA Inc.		Date of Disbursement MM / DD / YYYY 07 / 01 / 2013
Mailing Address 6213 Charlotte Ave. Suite 112		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.5344
City Nashville	State TN Zip Code 37209	
Purpose of Disbursement Compliance/Accounting		Category/ Type
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4049.00
TOTAL This Period (last page this line number only).....	

13020495215

**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 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Troy Brewer CPA Inc.		Date of Disbursement MM / DD / YYYY 08 / 02 / 2013
Mailing Address 6213 Charlotte Ave. Suite 112		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.5369
City Nashville	State TN Zip Code 37209	
Purpose of Disbursement Compliance	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Troy Brewer CPA Inc.		Date of Disbursement MM / DD / YYYY 08 / 27 / 2013
Mailing Address 6213 Charlotte Ave. Suite 112		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.5397
City Nashville	State TN Zip Code 37209	
Purpose of Disbursement Compliance	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Justin T. Wax		Date of Disbursement MM / DD / YYYY 09 / 20 / 2013
Mailing Address 3022 Rollen Rd.		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5359
City Murfreesboro	State TN Zip Code 37130	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4400.00
TOTAL This Period (last page this line number only).....	

13020495216

**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 30 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Wax Family Printing			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013	
Mailing Address 215 MTCS Dr.			Amount of Each Disbursement this Period \$, , 1889.06 Transaction ID : SB17.5346	
City Murfreesboro	State TN	Zip Code 37129		
Purpose of Disbursement		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Wax Family Printing			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013	
Mailing Address 215 MTCS Dr.			Amount of Each Disbursement this Period \$, , 383.70 Transaction ID : SB17.5398	
City Murfreesboro	State TN	Zip Code 37129		
Purpose of Disbursement Printing		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	\$, , 2272.76
TOTAL This Period (last page this line number only).....	\$, , 38977.79

13020495217

**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 31 OF 31			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
JOE CARR FOR SENATE

Full Name (Last, First, Middle Initial) A. Karen Hudson		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013
Mailing Address 2010 Stratford Rd.		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB20A.5451
City Murfreesboro	State TN	
Zip Code 37129	Purpose of Disbursement Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

13020495218

FROM:

Carr

370 Oakley Dr. Apt. C12
Nashville, TN 37211



7012 2920 0002 2419 0634

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SECRETARY

DANA K. MCCALLUM
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PHONE: (202) 224-0322

United States Senate

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Date of Receipt

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Postmark **10/17/13**

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Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

NEXT BUSINESS DAY DELIVERY

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

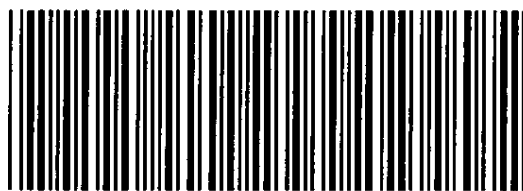
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OTHER _____
Date of Receipt or Postmark

PREPARER **DH** DATE PREPARED **10/22/13**

13020495220



13020495221