

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

SECRETARY OF THE SENATE
14 OCT 17 AM 11:31
Office Use Only

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

ADDRESS (number and street) 776 Mount Moriah Road
Check if different than previously reported. (ACC) Memphis TN 38117

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
00561688 IS THIS REPORT NEW (N) OR AMENDED (A) TN STATE ▼ DISTRICT

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
 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 in the State of
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on M M Y Y Y Y in the State of

5. Covering Period 07 19 2014 through 09 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 10 14 2014

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

14020982191

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Flinn for Senate

Report Covering the Period: From:

MM / DD / YYYY
07 / 19 / 2014

To:

MM / DD / YYYY
09 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	24,249.5	94,249.5
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	24,249.5	94,249.5
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	597,104.60	1,145,913.90
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	597,104.60	1,145,913.90
8. Cash on Hand at Close of Reporting Period (from Line 27)...	648,761.05	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	1,805,250.00	

For further information contact:

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

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

14020982192

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Flinn for Senate

Report Covering the Period: From:

MM / DD / YYYY
07 / 19 / 2014

To:

MM / DD / YYYY
09 / 30 / 2014

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)...	0.00	7000.00
(ii) Unitemized	24,249.5	24,249.5
(iii) TOTAL of contributions from individuals .	24,249.5	94,249.5
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	24,249.5	94,249.5
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	1,805,250.00
(b) All Other Loans...	0.00	
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	1,805,250.00
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)...	24,249.5	1,814,674.95

14020982193

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	59,7104.60	1,145,913.90
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	20,000.00	20,000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	000	000
(b) Of All Other Loans	000	000
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	000	000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	000	000
(b) Political Party Committees...	000	000
(c) Other Political Committees (such as PACs) ..	000	000
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	000	000
21. OTHER DISBURSEMENTS ..	000	000
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	617,104.60	1,165,913.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	1,263,440.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	24,249.5
25. SUBTOTAL (add Line 23 and Line 24)...	1,265,865.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	617,104.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	648,761.05

14020982194

**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
 PAGE 1 OF 20

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. *Facebook SUMXJ6*
 Mailing Address

Date of Disbursement
 M M D D Y Y Y Y
07 21 2014

City State Zip Code

Purpose of Disbursement
Online Facebook Ads

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period
. 76.50

004
 Category/Type

B. *Fed Ex - Kinkos*
 Mailing Address

Date of Disbursement
 M M D D Y Y Y Y
07 21 2014

City State Zip Code
Cordova TN 38016

Purpose of Disbursement
Overnight Delivery

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period
320.00

004
 Category/Type

C. *Flinn Broadcasting*
 Mailing Address

Date of Disbursement
 M M D D Y Y Y Y
07 21 2014

City State Zip Code
Memphis TN 38141

Purpose of Disbursement
RADIO ADVERTISING

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period
4,942.00

004
 Category/Type

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

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

14020982195

**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

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NAME OF COMMITTEE (In Full)
Flinn for Senate

A. **Perkins RESTAURANT**
 Mailing Address: **3400 Poplar Ave**
 City: **Memphis** State: **TN** Zip Code: **38111**
 Purpose of Disbursement: **CAMPAIGN MTG. Breakfast** 001
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: **07 22 2014**
 Amount of Each Disbursement this Period: **24.38**

B. **CAISSA Public STRATEGY**
 Mailing Address: **119 South Main**
 City: **Memphis TN** State: _____ Zip Code: **38103**
 Purpose of Disbursement: **Direct Mail - Healthcare** 003
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: **07 23 2014**
 Amount of Each Disbursement this Period: **230,000.00**

C. **Thunderbolt Broadcasting**
 Mailing Address: _____
 City: _____ State: _____ Zip Code: _____
 Purpose of Disbursement: **RADIO AD** 004
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: **07 23 2014**
 Amount of Each Disbursement this Period: **490.28**

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

14020982196

**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

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NAME OF COMMITTEE (In Full)
Flinn for Senate

A. *Rutherford County GOP*
 Mailing Address
 City *Murphreesboro* State *TN* Zip Code
 Purpose of Disbursement *Lincoln Day Dinner (Table)* 007
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: District:

Date of Disbursement
 M D Y Y Y
07 24 2014
 Amount of Each Disbursement this Period
1,000.00

B. *Shell Service Station*
 Mailing Address *7200 U.S. 64*
 City *Bartlett* State *TN* Zip Code *38135*
 Purpose of Disbursement *Gasoline* 001
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: District:

Date of Disbursement
 M D Y Y Y
07 24 2014
 Amount of Each Disbursement this Period
40.58

C. *Facebook 7KNPJ6*
 Mailing Address
 City State Zip Code
 Purpose of Disbursement *Online Advertising* 004
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: District:

Date of Disbursement
 M D Y Y Y
07 25 2014
 Amount of Each Disbursement this Period
250.45

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

14020982197

**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

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NAME OF COMMITTEE (In Full)
Fling for Senate

A. Chengis Grill
 Full Name (Last, First, Middle Initial)
 Mailing Address: 1700 Germantown Parkway
 City: Cardova State: TN Zip Code: 38016
 Purpose of Disbursement: CAMPAIGN STRATEGY Dinner 001
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: 07 25 2014
 Amount of Each Disbursement this Period: 5433

B. Mac Yearwood
 Full Name (Last, First, Middle Initial)
 Mailing Address: _____
 City: Millington State: TN Zip Code: 38053
 Purpose of Disbursement: CAMPAIGN MANAGER 001
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: 07 25 2014
 Amount of Each Disbursement this Period: 1,125.50

C. Callcentric
 Full Name (Last, First, Middle Initial)
 Mailing Address: _____
 City: _____ State: CA Zip Code: _____
 Purpose of Disbursement: _____ 001
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: 07 28 2014
 Amount of Each Disbursement this Period: 40.00

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

14020982198

**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)
Flinn for Senate

Full Name (Last, First, Middle Initial) A. <u>Leah Talfon</u>		Date of Disbursement M M / D D / Y Y Y Y <u>07 28 2014</u>
Mailing Address		Amount of Each Disbursement this Period <u>748.00</u>
City <u>Memphis</u>	State <u>TN</u> Zip Code <u>38104</u>	
Purpose of Disbursement <u>Campaign Intern</u>		Category/ Type <u>001</u>
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. <u>Perkins Restaurant</u>		Date of Disbursement M M / D D / Y Y Y Y <u>07 28 2014</u>
Mailing Address <u>3400 Poplar Ave</u>		Amount of Each Disbursement this Period <u>33.04</u>
City <u>Memphis</u>	State <u>TN</u> Zip Code <u>38111</u>	
Purpose of Disbursement <u>Campaign Breakfast Strategy</u>		Category/ Type <u>001</u>
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. <u>Regions Bank</u>		Date of Disbursement M M / D D / Y Y Y Y <u>07 28 2014</u>
Mailing Address <u>6200 Poplar Ave</u>		Amount of Each Disbursement this Period <u>15.00</u>
City <u>Memphis</u>	State <u>TN</u> Zip Code <u>38120</u>	
Purpose of Disbursement <u>Money Wire Transfer Fee</u>		Category/ Type <u>001</u>
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

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

14020982199

**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
 PAGE **6** OF **20**

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NAME OF COMMITTEE (In Full)
Flinn for Senate

A. CAISSA Public STRATEGY

Full Name (Last, First, Middle Initial)
 Mailing Address: *119 South Main*
 City: *Memphis* State: *TN* Zip Code: *38103*

Date of Disbursement: *07 29 2014*

Purpose of Disbursement: *Rebo Call To 700,000 voters*
 Candidate Name: _____ Category/Type: *003*

Amount of Each Disbursement this Period: *20,000.00*

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: _____ District: _____

B. CAISSA Public STRATEGY

Full Name (Last, First, Middle Initial)
 Mailing Address: *119 South Main*
 City: *Memphis* State: *TN* Zip Code: *38103*

Date of Disbursement: *07 29 2014*

Purpose of Disbursement: *Direct Mail - Comparison*
 Candidate Name: _____ Category/Type: *004*

Amount of Each Disbursement this Period: *200,000.00*

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: _____ District: _____

C. Callcentric

Full Name (Last, First, Middle Initial)
 Mailing Address: _____
 City: _____ State: *CA* Zip Code: _____

Date of Disbursement: *07 29 2014*

Purpose of Disbursement: *Phone Service*
 Candidate Name: _____ Category/Type: *001*

Amount of Each Disbursement this Period: *20.00*

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).....

14020982200

**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 **7** OF **20**

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

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NAME OF COMMITTEE (in Full)
Flinn for Senate

A. **Fed Ex** Date of Disbursement: **07 29 2014**

Mailing Address: **Germantown Parkway**

City: **Cordova** State: **TN** Zip Code: **38016** Amount of Each Disbursement this Period: **46.85**

Purpose of Disbursement: **Overnight Delivery** Category/Type: **001**

Candidate Name: _____

Office Sought: House Senate President Disbursement For: Primary General Other (specify)

State: _____ District: _____

B. **Fed Ex** Date of Disbursement: **07 30 2014**

Mailing Address: **Germantown Parkway**

City: **Cordova** State: **TN** Zip Code: **38016** Amount of Each Disbursement this Period: **58.50**

Purpose of Disbursement: **Overnight Delivery** Category/Type: **001**

Candidate Name: _____

Office Sought: House Senate President Disbursement For: Primary General Other (specify)

State: _____ District: _____

C. **Hard Rock Cafe** Date of Disbursement: **07 30 2014**

Mailing Address: **Beale Street**

City: **Memphis** State: **TN** Zip Code: **38103** Amount of Each Disbursement this Period: **50.00**

Purpose of Disbursement: **Campaign Staff lunch** Category/Type: **001**

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).....

14020982201

**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

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NAME OF COMMITTEE (In Full)
Hinn for Senate

A. Callcentric

Full Name (Last, First, Middle Initial)

Mailing Address

City **CA** State Zip Code

Purpose of Disbursement

Candidate Name **Phone Service** Category/Type **001**

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **07 30 2014**

Amount of Each Disbursement this Period: **2000**

B. FedEx

Full Name (Last, First, Middle Initial)

Mailing Address **GERMANTOWN PARKWAY**

City **Cordova** State **TN** Zip Code **38016**

Purpose of Disbursement **Over night Delivery**

Candidate Name Category/Type **001**

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **07 31 2014**

Amount of Each Disbursement this Period: **39.50**

C. CAISSA Public Strategy

Full Name (Last, First, Middle Initial)

Mailing Address **119 South Main**

City **Memphis** State **TN** Zip Code **38103**

Purpose of Disbursement **Direct Mail - Joe Carr Piece**

Candidate Name Category/Type **004**

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: **08 01 2014**

Amount of Each Disbursement this Period: **118,000.00**

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

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

14020982202

**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>9</u> OF <u>20</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	

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NAME OF COMMITTEE (In Full)
Flinn for Senate

A. <u>Callcenter</u>		Date of Disbursement
Mailing Address		<u>08 01 2014</u>
City	State <u>CA</u> Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement <u>Phone Service</u>	Candidate Name	<u>40.00</u>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type <u>001</u>	

B. <u>Facebook B3 PPI6</u>		Date of Disbursement
Mailing Address		<u>08 01 2014</u>
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement <u>Online Advertising</u>	Candidate Name	<u>43236</u>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type <u>004</u>	

C. <u>Kroger</u>		Date of Disbursement
Mailing Address <u>795 Germantown Parkway</u>		<u>08 01 2014</u>
City	State <u>TN</u> Zip Code <u>38018</u>	Amount of Each Disbursement this Period
Purpose of Disbursement <u>Gasoline</u>	Candidate Name	<u>37.25</u>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type <u>001</u>	

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

14020982203

**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>10</u> OF <u>20</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

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NAME OF COMMITTEE (In Full)
Flinn for Senate

Full Name (Last, First, Middle Initial) <i>A. Petty Cash</i>		Date of Disbursement M M ' D D Y Y Y Y <i>08 01 2014</i>
Mailing Address		Amount of Each Disbursement this Period <i>,500.00</i>
City	State Zip Code	
Purpose of Disbursement <i>Office Supplies - Drink - SNACKS</i>	Candidate Name <i>001</i> Category/ Type	
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <i>B. Callcentric</i>		Date of Disbursement M M ' D D Y Y Y Y <i>08 04 2014</i>
Mailing Address		Amount of Each Disbursement this Period <i>, 20.00</i>
City	State Zip Code	
Purpose of Disbursement <i>Phone Service Internet</i>	Candidate Name <i>001</i> Category/ Type	
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <i>C. Hillary Pate</i>		Date of Disbursement M M ' D D Y Y Y Y <i>08 04 2014</i>
Mailing Address		Amount of Each Disbursement this Period <i>, 7,500.00</i>
City	State Zip Code <i>TN</i>	
Purpose of Disbursement <i>CAMPAIGN COMMUNICATION DIRECTOR</i>	Candidate Name <i>001</i> Category/ Type	
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President		
State: District:		

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

14020982204

**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
 PAGE 11 OF 20

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NAME OF COMMITTEE (In Full)
Hinn for Senate

A. *Hillary Pate* Date of Disbursement: 08 04 2014

Mailing Address: _____

City: *Franklin* State: *TN* Zip Code: _____

Purpose of Disbursement: *Gas-Mileage & Car Rental June/July* Amount of Each Disbursement this Period: *1,119.73*

Candidate Name: _____ Category/Type: *001*

Office Sought: House Senate President Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

B. *Leah Talfon* Date of Disbursement: 08 04 2014

Mailing Address: _____

City: *Memphis* State: *TN* Zip Code: *38104*

Purpose of Disbursement: *Campaign Intern Research* Amount of Each Disbursement this Period: *505.00*

Candidate Name: _____ Category/Type: *001*

Office Sought: House Senate President Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

C. *Leah Talfon* Date of Disbursement: 08 04 2014

Mailing Address: _____

City: *Memphis* State: *TN* Zip Code: *38104*

Purpose of Disbursement: *Mileage + Expenses for Travel* Amount of Each Disbursement this Period: *225.00*

Candidate Name: _____ Category/Type: *001*

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)

14020982205

**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 12 OF 20	
	<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)
Flinn for Senate

Full Name (Last, First, Middle Initial) <i>A. Marathon GAS</i>		Date of Disbursement <i>08 04 2014</i>
Mailing Address <i>4550 Summer Ave</i>		Amount of Each Disbursement this Period <i>37.65</i>
City <i>Memphis</i>	State <i>TN</i> Zip Code <i>38134</i>	
Purpose of Disbursement <i>Gasoline</i>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <i>B. Travelocity</i>		Date of Disbursement <i>08 04 2014</i>
Mailing Address <i>Online</i>		Amount of Each Disbursement this Period <i>108.23</i>
City	State Zip Code	
Purpose of Disbursement <i>Hotel Room Cookeville - Gene</i>		Category/ Type <i>007</i>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <i>C. WALMART GAS</i>		Date of Disbursement <i>08 04 2014</i>
Mailing Address		Amount of Each Disbursement this Period <i>36.60</i>
City <i>Cookeville</i>	State <i>TN</i> Zip Code	
Purpose of Disbursement <i>Gasoline</i>		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

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

14020982206

**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
 PAGE 13 OF 20

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. <u>Embassy Suites</u>		Date of Disbursement M M / D D / Y Y Y Y <u>08 05 2014</u>
Mailing Address		Amount of Each Disbursement this Period <u>225.28</u>
City <u>Murphersboro</u> State <u>TN</u> Zip Code	Purpose of Disbursement <u>Hotel for Rutherford Co. Dinner</u> <u>005</u> Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. <u>Rhea County GOP</u>		Date of Disbursement M M / D D / Y Y Y Y <u>08 05 2014</u>
Mailing Address		Amount of Each Disbursement this Period <u>150.00</u>
City <u>Rhea County</u> State <u>TN</u> Zip Code	Purpose of Disbursement <u>2 Tickets for Dinner</u> <u>005</u> Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. <u>Callcentric</u>		Date of Disbursement M M / D D / Y Y Y Y <u>08 06 2014</u>
Mailing Address <u>online</u>		Amount of Each Disbursement this Period <u>2000</u>
City <u>CA</u> State <u>CA</u> Zip Code	Purpose of Disbursement <u>Phone/Internet Service</u> <u>001</u> Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type	

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

14020982207

**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

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)

Full Name (Last, First, Middle Initial) A. <u>Facebook B3PPL6</u>		Date of Disbursement M ^m D ^d Y ^y Y ^y <u>08 06 2014</u>
Mailing Address <u>online</u>		Amount of Each Disbursement this Period <u>,500.75</u>
City	State Zip Code	
Purpose of Disbursement <u>Online Advertising</u>	Candidate Name	Category/ Type <u>004</u>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. <u>Flinn Broadcasting</u>		Date of Disbursement M ^m D ^d Y ^y Y ^y <u>08 06 2014</u>
Mailing Address		Amount of Each Disbursement this Period <u>, 1,236.50</u>
City	State Zip Code <u>Memphis TN 38141</u>	
Purpose of Disbursement <u>Radio Ads</u>	Candidate Name	Category/ Type <u>004</u>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. <u>Forever Broadcasting</u>		Date of Disbursement M ^m D ^d Y ^y Y ^y <u>08 06 2014</u>
Mailing Address		Amount of Each Disbursement this Period <u>, 300.00</u>
City	State Zip Code	
Purpose of Disbursement <u>RADIO ADS</u>	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

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

14020982208

**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

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NAME OF COMMITTEE (In Full)
FINN for Senate

A. **Callcentric**
 Mailing Address: **Online**
 City: _____ State: _____ Zip Code: _____
 Purpose of Disbursement: **Phone/Internet Service**
 Candidate Name: _____ Category/Type: **001**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: **08 07 2014**
 Amount of Each Disbursement this Period: **40.00**

B. **Crockett Rockett**
 Mailing Address: _____
 City: **Crockett County TN** State: _____ Zip Code: _____
 Purpose of Disbursement: **Newspaper Ad**
 Candidate Name: _____ Category/Type: **004**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: **08 07 2014**
 Amount of Each Disbursement this Period: **160.00**

C. **EXXON**
 Mailing Address: **3800 Summer Ave**
 City: **Memphis TN** State: _____ Zip Code: **38112**
 Purpose of Disbursement: **Gasoline**
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____
 Date of Disbursement: **08 07 2014**
 Amount of Each Disbursement this Period: **40.00**

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

14020982209

**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	<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)
Finn for Senate

Full Name (Last, First, Middle Initial) A. <i>Folks Folly</i>		Date of Disbursement M M ' D D ' Y Y Y Y <i>08 07 2014</i>
Mailing Address <i>Mendonhall Rd,</i>		Amount of Each Disbursement this Period <i>, 177.4</i>
City <i>Memphis</i>	State <i>TN</i> Zip Code <i>38117</i>	
Purpose of Disbursement <i>Campaign Strategy Dinner</i>	Candidate Name <i>001</i>	
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input checked="" type="checkbox"/> Primary	
<input type="checkbox"/> House <input type="checkbox"/> President	<input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. <i>Jason's Deli</i>		Date of Disbursement M M ' D D ' Y Y Y Y <i>08 07 2014</i>
Mailing Address <i>Mt. Moriah Rd.</i>		Amount of Each Disbursement this Period <i>, 484.29</i>
City <i>Memphis</i>	State <i>TN</i> Zip Code <i>38117</i>	
Purpose of Disbursement <i>Election Day Food</i>	Candidate Name <i>005</i>	
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input checked="" type="checkbox"/> Primary	
<input type="checkbox"/> House <input type="checkbox"/> President	<input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. <i>Meredith WSMU</i>		Date of Disbursement M M ' D D ' Y Y Y Y <i>08 07 2014</i>
Mailing Address		Amount of Each Disbursement this Period <i>, 30.00</i>
City <i>Memphis</i>	State <i>TN</i> Zip Code	
Purpose of Disbursement <i>Poll Worker</i>	Candidate Name <i>005</i>	
Office Sought: <input type="checkbox"/> Senate	Disbursement For: <input type="checkbox"/> Primary	
<input type="checkbox"/> House <input type="checkbox"/> President	<input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

14020982210

**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>7</u> OF <u>20</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

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NAME OF COMMITTEE (In Full)
FINN FOR SENATE

Full Name (Last, First, Middle Initial) <u>A. Party City</u>		Date of Disbursement M M ' D D Y Y Y Y <u>08 02 2014</u>
Mailing Address <u>3450 Poplar Ave</u>		Amount of Each Disbursement this Period <u>42.64</u>
City <u>Memphis</u>	State <u>TN</u> Zip Code <u>38111</u>	
Purpose of Disbursement <u>Decorations for Election Day</u>	Candidate Name <u>UOS</u> Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <u>B. Enterprise Car Rental</u>		Date of Disbursement M M ' D D Y Y Y Y <u>08 12 2014</u>
Mailing Address <u>7900 U.S. 64</u>		Amount of Each Disbursement this Period <u>343.78</u>
City <u>Bartlett</u>	State <u>TN</u> Zip Code <u>38135</u>	
Purpose of Disbursement <u>Car Rental</u>	Candidate Name <u>001</u> Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <u>C. Mae Yearwood</u>		Date of Disbursement M M ' D D Y Y Y Y <u>08 12 2014</u>
Mailing Address		Amount of Each Disbursement this Period <u>1,125.50</u>
City <u>Millington</u>	State <u>TN</u> Zip Code <u>38053</u>	
Purpose of Disbursement <u>Campaign Manager</u>	Candidate Name <u>001</u> Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

14020982211

**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>18</u> OF <u>20</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	

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NAME OF COMMITTEE (In Full)
Flinn for Senate

Full Name (Last, First, Middle Initial) A. <u>Voicent Communications</u>		Date of Disbursement M M / D D / Y Y Y Y <u>08 / 12 / 2014</u>
Mailing Address <u>online Software</u>		Amount of Each Disbursement this Period <u>59.00</u>
City <u></u>	State <u></u>	
Purpose of Disbursement <u></u>		Category/ Type <u>001</u>
Candidate Name <u></u>		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u></u>	District: <u></u>	

Full Name (Last, First, Middle Initial) B. <u>Hillary Pate</u>		Date of Disbursement M M / D D / Y Y Y Y <u>08 / 13 / 2014</u>
Mailing Address <u></u>		Amount of Each Disbursement this Period <u>, 980.56</u>
City <u>Franklin</u>	State <u>TN</u>	
Purpose of Disbursement <u>AUGUST - Mileage & Hotel</u>		Category/ Type <u>001</u>
Candidate Name <u></u>		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u></u>	District: <u></u>	

Full Name (Last, First, Middle Initial) C. <u>Facebook GIBTPG</u>		Date of Disbursement M M / D D / Y Y Y Y <u>08 / 22 / 2014</u>
Mailing Address <u>online</u>		Amount of Each Disbursement this Period <u>, 69.21</u>
City <u></u>	State <u></u>	
Purpose of Disbursement <u>online Advertising</u>		Category/ Type <u>004</u>
Candidate Name <u></u>		
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u></u>	District: <u></u>	

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

14020982212

**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 20

<input 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)
Flinn for Senate

A. *VOICENET COMMUNICATORS*

Mailing Address

City State Zip Code

Purpose of Disbursement
Internet Software

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
09 12 2014

Amount of Each Disbursement this Period
5900

Category/Type
001

B. *ENTER PRISO CAR RENTAL*

Mailing Address
U.S. Highway 64

City State Zip Code
Bartlett TN 39935

Purpose of Disbursement
Adjustment of fees

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
09 15 2014

Amount of Each Disbursement this Period
8018

Category/Type
001

C. *EUGENE BRYAN*

Mailing Address

City State Zip Code
Cordova TN 38018

Purpose of Disbursement
Campaign Strategy/Mgt. Aug.

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
09 15 2014

Amount of Each Disbursement this Period
3000.00

Category/Type
001

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

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

14020982213

**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

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NAME OF COMMITTEE (In Full)
Flinn for Senate

A. Flinn for TN Senate Date of Disbursement
 Mailing Address 1326 EASTmoreland 09 19 2014
 City Memphis State TN Zip Code 38104 Amount of Each Disbursement this Period
 Purpose of Disbursement TRANSFER FUND TO CAMPAIGN 008 20,000.00
 Candidate Name George S. Flinn Jr Category/Type
 Office Sought: House Disbursement For: Primary General
 Senate Other (specify)
 President
 State: District:

B. Date of Disbursement
 Mailing Address
 City State Zip Code
 Purpose of Disbursement
 Candidate Name Category/Type
 Office Sought: House Disbursement For: Primary General
 Senate Other (specify)
 President
 State: District:

C. Date of Disbursement
 Mailing Address
 City State Zip Code
 Purpose of Disbursement
 Candidate Name Category/Type
 Office Sought: House Disbursement For: Primary General
 Senate Other (specify)
 President
 State: District:

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

14020982214

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)
Flinn, George S. Jr.

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
472 Goodwyn

City, State ZIP Code
Memphis TN 38111

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<i>1,805,250.00</i>	<i>0.00</i>	<i>1,805,250.00</i>

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
<i>MM/DD/YYYY 04/25/2014</i>	<i>MM/DD/YYYY 12/01/2014</i>	<i>0.00% (apr)</i>	<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)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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) ..	▶	

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

14020982215

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)		Report Covering Period:				
<i>Flinn for Senate</i>		From:		To:		
		<i>07 19 2014</i>		<i>09 30 2014</i>		
Committee Name					(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
					<i>2424.95</i>	<i>0.</i>
B Column Total Last Page Only.....					<i>9424.95</i>	<i>0.</i>
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	<i>0</i>	<i>0</i>	<i>2424.95</i>	<i>0</i>	<i>0</i>	<i>0</i>
B	<i>0</i>	<i>0</i>	<i>9425.95</i>	<i>0</i>	<i>1,805,250.00</i>	<i>0</i>
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	<i>0</i>	<i>0</i>	<i>0</i>	<i>2424.95</i>	<i>597,104.60</i>	<i>20,000.00</i>
B	<i>1,805,250.00</i>	<i>0</i>	<i>0</i>	<i>1,814,674.95</i>	<i>1,145,913.90</i>	<i>20,000.00</i>
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other 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) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligation. Owed TO the Committee
A	<i>0</i>	<i>0</i>	<i>617,104.60</i>	<i>1,263,440.70</i>	<i>648,761.05</i>	<i>0</i>
B	<i>0</i>	<i>0</i>	<i>1,165,913.90</i>	<i>1,665,440.70</i>	<i>1,263,440.70</i>	<i>0</i>
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A	<i>1,805,250.00</i>	<i>2424.95</i>	<i>597,104.60</i>			
B	<i>1,805,250.00</i>	<i>9424.95</i>	<i>1,145,913.90</i>			

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Total Packages [Redacted] Total Weight [Redacted]
Sender's Name [Redacted] Receiver's Name [Redacted]
Sender's Address [Redacted] Receiver's Address [Redacted]

7 Payment Bill to: [Redacted]
Special Handling and Delivery Signature Options:
 FedEx Envelope
 FedEx Pak
 FedEx Box
 FedEx Tube
 Other

3 To: [Redacted]
4 Your Internal Billing Reference: [Redacted]

5 Packaging: [Redacted]
6 Special Handling and Delivery Signature Options:
 FedEx Envelope
 FedEx Pak
 FedEx Box
 FedEx Tube
 Other

4 Express Package Service
Form No. 2000
Postage: [Redacted]

1 From: [Redacted]
2 To: [Redacted]
3 Recipient's Name: [Redacted]
4 Recipient's Address: [Redacted]
5 Recipient's City: [Redacted] State: [Redacted] ZIP: [Redacted]

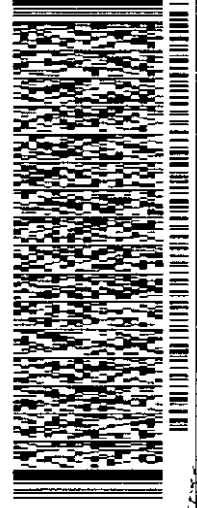
FedEx NEW Package
Express US Airbill
Form No. 2000
Postage: [Redacted]

U.S. SENATE
TRACKING NUMBER
13-061015



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USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	<u>10/14/14</u>	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

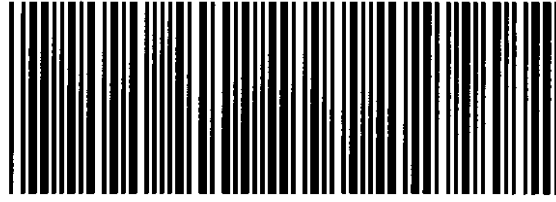
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FAX _____
Date of Receipt

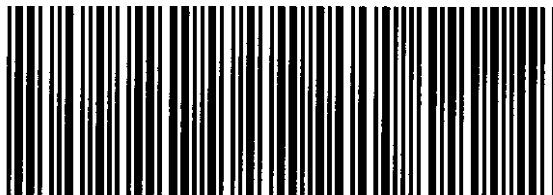
OTHER _____
Date of Receipt or Postmark

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SEN PATCH

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