

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) P.O. Box 10 Parsons TN 38363 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2014 through 03 / 31 / 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 Jessica Redden

Signature of Treasurer Jessica Redden [Electronically Filed] Date 04 / 11 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

THMCarePAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		256850.01
(b) Cash on Hand at Beginning of Reporting Period.....	256850.01	
(c) Total Receipts (from Line 19)	14970.50	14970.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	271820.51	271820.51
7. Total Disbursements (from Line 31).....	22350.00	22350.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	249470.51	249470.51
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)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

THMCarePAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5760.00	5760.00
(ii) Unitemized	9210.50	9210.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14970.50	14970.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	14970.50	14970.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	14970.50	14970.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	14970.50	14970.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	22350.00	22350.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	22350.00	22350.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22350.00	22350.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	14970.50	14970.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14970.50	14970.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
THMCarePAC

A. David Davis
Full Name (Last, First, Middle Initial)

Mailing Address 184 Fisher Drive

City Parsons State TN Zip Code 38363

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

Name of Employer THM Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 31 / 2014
Transaction ID : SA11AI.4880

Amount of Each Receipt this Period 900.00

Total contribution 1.1.14-3.31.14

B. Tammy Faulkner
Full Name (Last, First, Middle Initial)

Mailing Address 325 Reeds Levee Road

City McKenzie State TN Zip Code 38261

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

Name of Employer THM Occupation RN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2014
Transaction ID : SA11AI.4881

Amount of Each Receipt this Period 300.00

Total contribution 1.1.14-3.31.14

C. Richard McCormick
Full Name (Last, First, Middle Initial)

Mailing Address 1235 Thorntree Drive

City Dyersburg State TN Zip Code 38024

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

Name of Employer Northbrooke Health Care Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 31 / 2014
Transaction ID : SA11AI.4887

Amount of Each Receipt this Period 360.00

Total contribution 1.1.14-3.31.14

SUBTOTAL of Receipts This Page (optional).....▶ 1560.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THMCarePAC

Full Name (Last, First, Middle Initial)
A. George Munchow

Mailing Address 3744 Westridge Cove

City State Zip Code
Bartlett TN 38135

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

Name of Employer Occupation
Applingwood Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.4886

Amount of Each Receipt this Period
300.00

Total contribution 1.1.14-3.31.14

Full Name (Last, First, Middle Initial)
B. Jeffery Parrish

Mailing Address 11555 Sardis Road

City State Zip Code
Scotts Hill TN 38374

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

Name of Employer Occupation
THM Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.4882

Amount of Each Receipt this Period
1200.00

Total contribution 1.1.14-3.31.14

Full Name (Last, First, Middle Initial)
C. James Smith

Mailing Address PO Box 458

City State Zip Code
Parsons TN 38363

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

Name of Employer Occupation
THM CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.4883

Amount of Each Receipt this Period
1200.00

Total contribution 1.1.14-3.31.14

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THMCarePAC

Full Name (Last, First, Middle Initial)
A. Joesph Strawn

Mailing Address 80 Dodd Street

City Lexington	State TN	Zip Code 38351
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FEC ID number of contributing federal political committee. **C**

Name of Employer THM	Occupation Project Director
-------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : SA11AI.4884

Amount of Each Receipt this Period
300.00

Total contribution 1.1.14-3.31.14

Full Name (Last, First, Middle Initial)
B. Anne Vise

Mailing Address 23 Riverbend CV

City Bath Springs	State TN	Zip Code 38311
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FEC ID number of contributing federal political committee. **C**

Name of Employer THM	Occupation Accountant
-------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : SA11AI.4885

Amount of Each Receipt this Period
1200.00

Total contribution 1.1.14-3.31.14

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	5760.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THMCarePAC

Full Name (Last, First, Middle Initial)

A. Glen Casada

Mailing Address 3144 Natoma Circle

City State Zip Code
Thompson's Station TN 37179

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: TN District: 63

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 07 / 2014

Transaction ID : **SB29.4898**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Rusty Crowe

Mailing Address 808 East 8th Ave

City State Zip Code
Johnson City TN 37601

Purpose of Disbursement
Rusty Crowe for Senate TN

Candidate Name

Office Sought: House
 Senate
 President
State: TN District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 07 / 2014

Transaction ID : **SB29.4896**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Hardin County Republican Party

Mailing Address P.O. Box 80

City State Zip Code
Pickwick Dam TN 38365

Purpose of Disbursement
Hardin County Republican Party

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2014

Transaction ID : **SB29.4915**

Amount of Each Disbursement this Period

500.00

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

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

2500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THMCarePAC

Full Name (Last, First, Middle Initial)

A. Bill Haslam

Mailing Address 1910 21ST AVENUE SOUTH

City NASHVILLE State TN Zip Code 37212

Purpose of Disbursement
Bill Haslam for Governor

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : SB29.4907

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Joey Hensley

Mailing Address 855 SUMMERTOWN HWY

City HOHENWALD State TN Zip Code 38462

Purpose of Disbursement
Friends of Joey Hensley

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : SB29.4905

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Brian Kelsey

Mailing Address P.O. BOX 382354

City Germantown State TN Zip Code 38183

Purpose of Disbursement
VoteKelsey.com

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 02 / 2014

Transaction ID : SB29.4889

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THMCarePAC

Full Name (Last, First, Middle Initial)

A. Madison County Republican Party

Mailing Address 164 West University Parkway

City Jackson State TN Zip Code 38305

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4908

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Carma McGee

Mailing Address P.O. Box 593

City Savannah State TN Zip Code 38372

Purpose of Disbursement
Carma McGee for Chancellor Committee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

012
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4912

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Doug Overbey

Mailing Address P.O. BOX 5316

City Maryville State TN Zip Code 37802

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: TN District: 02

Disbursement For: 2014 Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.4901

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THMCarePAC

Full Name (Last, First, Middle Initial)

A. Barrett Rich

Mailing Address P.O. BOX 505

City State Zip Code
SOMERVILLE TN 38038

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 07 / 2014

Transaction ID : SB29.4895

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mike Sparks

Mailing Address 303 JEFFERSON PIKE

City State Zip Code
Smryna TN 37167

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: TN District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 07 / 2014

Transaction ID : SB29.4894

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. John Stevens

Mailing Address P.O. BOX 399

City State Zip Code
HUNTINGDON TN 38344

Purpose of Disbursement
Friends of John Stevens

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 13 / 2014

Transaction ID : SB29.4906

Amount of Each Disbursement this Period

1000.00

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

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

2500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THMCarePAC

Full Name (Last, First, Middle Initial)

A. Beverly Strong

Mailing Address PO Box 271

City Alamo State TN Zip Code 38001

Purpose of Disbursement
Ann Strong for Crockett County Mayor

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4914

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Tennessee House Democratic Caucus

Mailing Address P.O. Box 198082

City Nashville State TN Zip Code 37219

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4892

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. TENNESSEE REPUBLICAN PARTY

Mailing Address 2424 21ST AVENUE
SUITE 200

City NASHVILLE State TN Zip Code 37212

Purpose of Disbursement
TENNESSEE REPUBLICAN PARTY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4910

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THMCarePAC

Full Name (Last, First, Middle Initial)

A. Bo watson

Mailing Address 1208 E. Dallas Road

City State Zip Code
Chatanooga TN 37405

Purpose of Disbursement
Friends of Bo Watson

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: TN District: 11

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.4903

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Timothy Wirgau

Mailing Address 130 ABBOTT LANE

City State Zip Code
Paris TN 38242

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.4900

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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