

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT MISSION

For State and Local Candidates For Single-Candidate Committees

1.	DATE OF REPORT	2.a. NAME OF CANDIDATE OR COMMITTEE									
	July 1st, 2014	James Maness									
2.b.	IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE						
					November 4	4th, 2014					
4.a.	CAMPAIGN ADDRESS AND PHONE										
	Street or Rural Route	City		State	Zip Code	Phone					
	2558 Edinburgh St.	Old Hickory		TN	37138	615-285-4986					
4.b.	CANDIDATE'S HOME ADDRESS (if different			01	7. 0						
	Street or Rural Route	City		State	Zip Code	Phone					
5.	OFFICE SOUGHT (include district number, if		6. NAME OF POLITICAL TREASURER (may be candidate)								
	Mt. Juliet City Commission Dist	trict Two	James Maness								
7.	CATEGORY OR REPORT (Check one)										
	FIRST SECOND THIRD	FOURTH	LJ PRE-	LJ PRE-	MID-YEAR	LJ YEAR-END					
	QUARTER QUARTER	QUARTER	PRIMARY	GENERAL	SUPPLEMENTAL	SUPPLEMENTAL					
8.a.	BEGINNING DATE OF REPORTING PERIOD			DATE OF REPOR							
	April 1st, 2014		J	une 30th, 2	014						
9. (0	Check one)										
	a. This campaign is exempt from detailed tures total \$1,000 or less for this report	d disclosure becaus	e contributions lete items 12d	(including in-kin	d) received total \$1,000	or less AND expendi-					
	b. X This campaign is required to file a det			contributions (in	cluding in-kind) received	total more than \$1,000					
	and/or expenditures total more than \$1,000 for this reporting period.										
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign											
	Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.										
	Some in ordinario of the any other non-	political parpose as	delined by the		revenue code.						
	(feman filler	7-1-14	,	//	Mon	7-1-14					
	signature of candidate	date	7	signature of	political treasurer	- date					
	and the state of t		Kor	0							
11.	11. WITMESS SIGNATURE										
($\int M$	100 200 A		1	$n\Omega$. /					
	may // (aness)	7-1-14		Traces 1	1 anen	7-1-14					
	signature of witness	date		signati	ure of witness	date					
		N. N. 1870		U							
12.	SUMMARY										
,	a. BALANCE ON HAND LAST REPORT				\$ <u>2,451.45</u>						
	b. TOTAL RECEIPTS THIS PERIOD				s _1,020.14						
					004.00						
,	c. TOTAL DISBURSEMENTS THIS PERIOD				\$	1					
	d. BALANCE ON HAND (12.a. plus 12.b. m	inus 12.c.)			\$ _	2,486.67					
	e. TOTAL LOANS OUTSTANDING				¢	500.00					
					Ψ_						
1	f. TOTAL OBLIGATIONS OUTSTANDING				\$ -	0					



JUL 2 - 2014 WILSON COUNTY ELECTION COMMISSION

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COV									
James Maness		FROM: 4/1/14	TO:	6/30/14						
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)										
a. Unitemized Contributions (\$100 or less from each source this	a. Unitemized Contributions (\$100 or less from each source this period)\$ 200.00									
b. Itemized Contributions (over \$100 from each source this perio	_									
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add	\$_	1,020.14								
16. LOANS RECEIVED THIS REPORTING PERIOD			\$_	0						
17. INTEREST RECEIVED THIS REPORTING PERIOD			\$_							
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in it	em 12.b.)		\$_	1,020.14						
DISBURSEMENTS										
19. EXPENDITURES (other than loan payments)										
a. Expenditures (\$100 or less each payee this period) (must be listed	ed by category - e	e.g., printing, postage	, gaso	line)						
Bank Fees	\$12.16									
Voter List	\$38.00									
Printing	\$57.22									
Professional Services	\$100.00)								
	\$									
	\$									
	\$									
	\$									
	\$									
Total of Expenditures (\$100 or less each payee)		\$ 207.38								
b. Itemized Expenditures (Over \$100 each payee this period)			_							
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a.			 \$	984.92						
	LOAN REPAYMENTS MADE THIS PERIOD									
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in	TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)									
22. IN-KIND CONTRIBUTIONS										
a. Unitemized in-kind contributions (\$100 or less from each source to										
b. Itemized in-kind contributions (over \$100 from each source this p	_									
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (a	\$	85.00								
23. OBLIGATIONS										
a. Unitemized Obligations Outstanding (\$100 or less each)		\$0								
b. Itemized Obligations Outstanding (Over \$100 each)		\$0								
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (mu	ıst be shown i item	n 12.f.)	\$	0						



WILSON COUNTY ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATEN COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVER	RING THE PERIOD					
James Maness				TO: 6/30/14					
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT				Amount 0					
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)									
First Name Robert	Middle Nam	е	Contribution Received For:		Amount of Contribution				
Last Name/Organization Name Maness			Primary Election	General Election	\$20.14				
Address 240 Hwy 104			Runoff (Local Election						
City Saltillo	State TN	Zip Code 38370	Date of Contribution	Aggregate This Election					
Occupation Retired			April 1st, 2014	\$20.14					
Employer			1						
Retired									
First Name Donato	Middle Nam	е	Contribution Received For:		Amount of Contribution				
Last Name/Organization Name Donofrio		B	Primary Election	\$250.00					
Address 1438 Brighton Circle			Runoff (Local Election	s Only)	¥				
Old Hickory	State TN	Zip Code 37138	Date of Contribution	Aggregate This Election					
Occupation Unarmed Security Office	er		April 17th, 201	14	\$250.00				
Employer			April 17th, 201	Ψ230.00					
U.S. Security Associates				et mellari of medicine					
First Name Frinda	Middle Name		Contribution Received For:		Amount of Contribution				
Last Name/Organization Name		70	Primary Election	\$550.00					
Maness Address			Runoff (Local Election	Ψ330.00					
240 Hwy 104		_							
City Saltillo	State TN	Zip Code 38370	Date of Contribution	Aggregate This Election					
Occupation Retired			June 21st, 2014	\$550.00					
Employer Retired									
First Name	Middle Name	9	Contribution Received For:	Amount of Contribution					
Last Name/Organization Name			☐ Primary Election ☐						
Address			Runoff (Local Elections	:*					
City	Zip Code	Date of Contribution	Aggregate This Election						
Occupation									
Employer									
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of (If this is the last page of contributions, this amount must lead to the contribution of the c		N. P. P. S.			\$820.14				





JUL 2- 2014 WILSON COUNTY ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATESSION

1. NAME OF CANDIDATE OR COMMITTEE James Maness				2. REPORT COVE FROM: 4/1/14	RING THE PERIOD TO: 6/30/14		
	Amount 0						
TOTAL ITEMIZED CAMPAIGN EXPENDITI COMPLETE THE APPROPRIATE ITEMS FOR ITEMS							
First Name	Middle Na	The state of the s	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Willoughby W	aves	7.588	1				
Address			Sponsorship	\$250.00			
City M4. Indian	State	Zip Code	-				
Mt. Juliet	TN Middle Na	37122	Purpose of Expenditure		Amount of Expenditure		
	Wildule Na	me	general page 12		Amount of Expenditure		
Last Name/Business Name Nation Builder			Training Web Hosting	\$101.33			
Address 448 S Hill St. Suite 200			Data Managem	72320			
City Los Angeles	State CA	Zip Code	7				
First Name	Middle Na	90013	Purpose of Expenditure		Amount of Evenenditure		
	IVIIddie IVal	THE .	- Purpose of Experiulture		Amount of Expenditure		
Last Name/Business Name Got Print			Printing	\$184.16			
7625 San Fernando Rd.	8B						
City Burbank	State CA	Zip Code					
First Name	91505	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name			-		7 and an exponential		
Adeas			Marketing Ma	\$242.05			
719 S. St Francis							
City Wichita	Wichita State Zip Code KS 67211						
First Name	Middle Nam	ne	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name		3 0/1 110-00	1				
Address			1				
City	State Zip Code						
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure		
ast Name/Business Name			2				
Address			1				
City	State	Zip Code					
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount mus					\$777.54		





ITEMIZED STATEMENT OF LOANS - CANDIDATE LECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE								2. REPORT COVERING THE PERIOD			
James Maness								FROM: TO: 6/30/1			30/14
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)											
Complete the Following for the Source of the Loan											
First Name Middle Name Outstanding						Loan Balance Loans Loan of Period) Received Payments			Outstanding Loan Balance (End of Period)		
James Last Name/Organization Name	\$500		0 0			\$500.00					
Maness		U									
Address 2558 Edinburgh St				Loan Receive	51						
City State Zip Code					ary Election						
				or Above Loa	an (If more space is needed please attach a page)						
First Name		Middle Name			First Name Middle Name						
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City		State	Zip Co	ode	City				State		Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding						
First Name		Middle Name			First Name Middle Name						
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City State Zip C			Zip Co	de	City				State		Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding						
First Name Middle Name					First Name				Middle	e Name	
Last Name/Organization Name					Last Name/Org	anization Na	me				
Address					Address						
City		State	Zip Co	de	City State Zip C					Zip Code	
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding						
First Name Middle Name					First Name Middle Name						
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City State Zip Co				de	City State Zip Code					Zip Code	
Amount Guaranteed Outstanding	Amount Guaranteed Outstanding					Amount Guaranteed Outstanding					
Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				Outstanding Lo (Beginning o		Loans Received			anding Loan Balance (End of Period)		

