

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 10/31/2018		2.a. NAME OF CANDIDATE OR COMMITTEE Mike Chauncey			
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE 11/6/2018		
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route 3555 Connelly Lane	City Chattanooga	State TN	Zip Code 37412	Phone (423) 413-4345	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)					
Street or Rural Route 3555 Connelly Lane	City Chattanooga	State TN	Zip Code 37412	Phone (423) 413-4345	
5. OFFICE SOUGHT (include district number, if applicable) East Ridge Council			6. NAME OF POLITICAL TREASURER (may be candidate) Carol Norman		
7. CATEGORY OR REPORT (Check one)					
<input type="checkbox"/> FIRST QUARTER	<input type="checkbox"/> SECOND QUARTER	<input type="checkbox"/> THIRD QUARTER	<input type="checkbox"/> FOURTH QUARTER	<input type="checkbox"/> PRE-PRIMARY	<input checked="" type="checkbox"/> PRE-GENERAL
			<input type="checkbox"/> MID-YEAR SUPPLEMENTAL	<input type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD 10/1/2018			8.b. ENDING DATE OF REPORTING PERIOD 9/27/2018		
9. (Check one)					
a. <input checked="" type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)					
b. <input type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including 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.					
_____ signature of candidate		_____ signature of political treasurer		_____ date	
					
11. WITNESS SIGNATURE					
_____ signature of witness		_____ date		_____ signature of witness	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT				\$	<u>1,286.38</u>
b. TOTAL RECEIPTS THIS PERIOD				\$	<u>300.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD				\$	<u>747.45</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)				\$	<u>838.93</u>
e. TOTAL LOANS OUTSTANDING				\$	<u>0.00</u>
f. TOTAL OBLIGATIONS OUTSTANDING				\$	<u>0.00</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Mike Chauncey			2. REPORT COVERING THE PERIOD	
			FROM: 10/1/2018	TO: 9/27/2018
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$0.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name Carnell	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Storie		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$200.00
Address 620 Melville Avenue		<input type="checkbox"/> Runoff (Local Elections Only)		
City Chattanooga	State TN	Zip Code 37412	Date of Contribution	Aggregate This Election
Occupation		10/06/18		\$201.00
Employer				
First Name Ron	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Renegar		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$100.00
Address 1105 Tamarack Trail		<input type="checkbox"/> Runoff (Local Elections Only)		
City East Ridge	State TN	Zip Code 37412	Date of Contribution	Aggregate This Election
Occupation		10/01/18		\$100.00
Employer				
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address		<input type="checkbox"/> Runoff (Local Elections Only)		
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Employer				
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address		<input type="checkbox"/> Runoff (Local Elections Only)		
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Employer				
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)				\$300.00



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Mike Chauncey			2. REPORT COVERING THE PERIOD FROM: 10/1/2018 TO: 9/27/2018		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name Vista Print		Campaign Supplies		\$119.07	
Address 2785 Wyman Street					
City Waltham	State MA				Zip Code 02451
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name East Ridge Hometown Magazine		Campaign Advertising		\$580.00	
Address 311 Windy Hollow Drive					
City Chattanooga	State TN				Zip Code 37421
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)				\$699.07	

