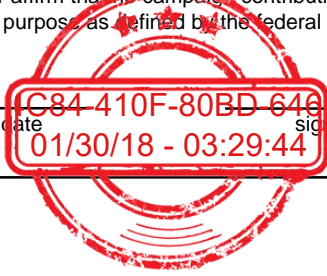


# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

|   |   |  |  |   |                                      |
|---|---|--|--|---|--------------------------------------|
| 1. DATE OF REPORT<br><b>1/30/2018</b>   |   | 2.a. NAME OF CANDIDATE OR COMMITTEE<br><b>Mary Anne Gibson</b> |  |   |                                      |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE<br><b>Mary Anne Gibson</b>   |   |  | 3. ELECTION DATE<br><b>8/2/2018</b>  |   |                                      |
| 4.a. CAMPAIGN ADDRESS AND PHONE   |   |  |  |   |                                      |
| Street or Rural Route   | City                                    | State  | Zip Code   | Phone   |                                      |
| <b>1661 Aaron Brenner Drive Suite 3</b>   | <b>Memphis</b>                          | <b>TN</b>  | <b>38120</b>   | <b>(901) 761-2720</b>                                     |                                      |
| 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)  |   |  |  |   |                                      |
| Street or Rural Route   | City                                    | State  | Zip Code   | Phone   |                                      |
| <b>8688 Pepper Bush Lane</b>  | <b>Germantown</b>                       | <b>TN</b>  | <b>38139</b>   | <b>(901) 487-0531</b>                                     |                                      |
| 5. OFFICE SOUGHT (include district number, if applicable)<br><b>Germantown Alderman, Pos. 2</b>   |   |  | 6. NAME OF POLITICAL TREASURER (may be candidate)<br><b>Norris McGehee</b> |   |                                      |
| 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 type="checkbox"/> PRE-GENERAL |
|   |   |  | <input type="checkbox"/> MID-YEAR SUPPLEMENTAL                             | <input checked="" type="checkbox"/> YEAR-END SUPPLEMENTAL |                                      |
| 8.a. BEGINNING DATE OF REPORTING PERIOD<br><b>7/1/2017</b>  |   |  | 8.b. ENDING DATE OF REPORTING PERIOD<br><b>1/15/2018</b>                   |   |                                      |
| 9. (Check one)  |   |  |  |   |                                      |
| a. <input 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 checked="" 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  |   | _____ date   |  | _____ signature of political treasurer                    |                                      |
|   |   |  |  |   |                                      |
| 11. WITNESS SIGNATURE   |   |  |  |   |                                      |
| _____ signature of witness  |   | _____ date   |  | _____ signature of witness                                |                                      |
|   |   |  |  |   |                                      |
| 12. SUMMARY   |   |  |  |   |                                      |
| a. BALANCE ON HAND LAST REPORT .....  |   |  | \$ <u>1,918.38</u>   |   |                                      |
| b. TOTAL RECEIPTS THIS PERIOD .....   |   |  | \$ <u>1,600.00</u>   |   |                                      |
| c. TOTAL DISBURSEMENTS THIS PERIOD .....  |   |  | \$ <u>531.95</u>   |   |                                      |
| d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....   |   |  | \$ <u>2,986.43</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<br><b>Mary Anne Gibson</b>   |                    |  | 2. REPORT COVERING THE PERIOD |                         |
|  |                    |  | FROM: 7/1/2017                | TO: 1/15/2018           |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)  |                    |  |                               | Amount<br><b>\$0.00</b> |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)   |                    |  |                               |                         |
| First Name<br><b>G.D.</b>  | Middle Name        | Contribution Received For:   |                               | Amount of Contribution  |
| Last Name/Organization Name<br><b>Roberts</b>  |                    | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                               | <b>\$1,000.00</b>       |
| Address<br><b>3320 Pointe South Cove</b>   |                    | <input type="checkbox"/> Runoff (Local Elections Only)   |                               |                         |
| City<br><b>Memhpis</b>   | State<br><b>TN</b> | Zip Code<br><b>38125</b>   | Date of Contribution          | Aggregate This Election |
| Occupation<br><b>Retired</b>   |                    | <b>11/03/17</b>  |                               | <b>\$1,000.00</b>       |
| Employer<br><b>Retired</b>   |                    |  |                               |                         |
| First Name   | Middle Name        | Contribution Received For:   |                               | Amount of Contribution  |
| Last Name/Organization Name<br><b>Committee to ReElect Forrest Owens</b>   |                    | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                               | <b>\$500.00</b>         |
| Address<br><b>9180 Forest Estates Cv.</b>  |                    | <input type="checkbox"/> Runoff (Local Elections Only)   |                               |                         |
| City<br><b>Germantown</b>  | State<br><b>TN</b> | Zip Code<br><b>38139</b>   | Date of Contribution          | Aggregate This Election |
| Occupation   |                    | <b>07/03/17</b>  |                               | <b>\$500.00</b>         |
| 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<br>(Carry forward to item 3. of next page if additional pages of this form are used.)<br>(If this is the last page of contributions, this amount must be shown in item 15b. of summary.) |                    |  |                               | <b>\$1,500.00</b>       |



