CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 1/26/25 2.a. Candidate or Committee Name: Vicki Gandee

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 11/5/24

4. Campaign Address: 7164 Woodridge Lane

City: Germantown State: TN Zip Code: 38138 Phone: 901 412 2691

5. Candidate Home Address: & 7164 Woodridge Lane

City: Germantown State: TN Zip Code: 38138 Phone: 901 4122691

Candidate Email Address: _____

6. Office Sought: (include district number, if applicable) Germantown School Board Position 5

7. Name of Political Treasurer (may be candidate): Pam Proctor

Political Treasurer Email Address: gandee.vote@gmail.com

8. Category or Report: (check one)

☐ First Quarter ☐ Second Quarter ☐ Third Quarter ☒ Fourth Quarter ☐ Pre-Primary ☐ Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election

9. Reporting Period: Start Date: 10/29/24 End Date: 1/15/25

10. Detailed Disclosure: (Check one)

☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total $1,000 or less AND expenditures total $1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)

☒ 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.

11. 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.

Candidate Signature	Date	Political Treasurer Signature	Date
Vicki Gandee	1-26-25	Pamela Proctor	27 Jan '25
Witness Signature	Date	Witness Signature	Date
[signature]	1-26-25	[signature]	1/27/25

12. Summary:

a.	Balance On Hand Last Report	$ 1688.45
b.	Total Receipts This Period	$ 450
c.	Total Disbursements This Period	$ 2011.75
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 126.70
e.	Total Loans Outstanding	$ 0
f.	Total Obligations Outstanding	$ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: VICKI GANDEE

14. Reporting Period: Start Date: 10/29/24 End Date: 1/15/25

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 0
(Note: Effective January 16, 2023, Unitemized Contributions are capped at $2,000. See *Instructions* for more information.)

b. Itemized Contributions (over $100 from each source this period) ..... $ 450

c. Loans Received This Reporting Period ..... $ 0

d. Interest Received This Reporting Period ..... $ 0

e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... $ 450

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 2011.75
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $ 0

c. Total Obligation Payments Made This Period ..... $ 0

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) ..... $ 2011.75

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $ 0

b. Itemized In-Kind Contributions Received This Period ..... $ 0

c. Total In-Kind Contributions Received This Period ..... $ 0

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Vicki Gandee

2. Reporting Period: Start Date: 10/29/24 End Date: 1/15/25

3. Total campaign contributions from preceding page (enter $0 if first page) $ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Sierra Middle Name: _____ Last Name: Wilson

Address: 1623 Hearn Lane City: Van Alstyne State: TX Zip Code: 75495

Occupation: Home caretaker Employer: N/A

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ 100 Date of Contribution: 10/29/24 Aggregate This Election: $ 100

Business or Organization Name: _____ **OR**

First Name: Robbie Middle Name: _____ Last Name: Davis

Address: 2830 Waterleaf Dr City: Germantown State: TN Zip Code: 38138

Occupation: Retired Employer: N/A

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ 100 Date of Contribution: 10/20/24 Aggregate This Election: $ 700

Business or Organization Name: _____ **OR**

First Name: James Middle Name: _____ Last Name: Shanks

Address: 2333 Lansing Wood Dr City: Germantown State: TN Zip Code: 38139

Occupation: Retired Employer: _____

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ 250 Date of Contribution: 10/20/24 Aggregate This Election: $ 600

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ _____ Date of Contribution: _____ Aggregate This Election: $ _____

Total Contributions: $ 450

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: VICKI GANDEE

2. Reporting Period: Start Date: 10/29/24 End Date: 1/15/25

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: KWAM **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5495 MURRAY RD City: MEMPHIS State: TN Zip Code: 38119
Purpose of Expenditure: POLITICAL ADVERTISING
Amount of Expenditure: $ 825 Date of Expenditure: $ 11/21/24

Business or Organization Name: OFFICE DEPOT **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1275 N GERMANTOWN RD City: GERMANTOWN State: TN Zip Code: 38138
Purpose of Expenditure: FLYERS - POLITAL
Amount of Expenditure: $ 309.49 Date of Expenditure: $ 11/1/24

Business or Organization Name: _____ **OR**
First Name: MERIBETH Middle Name: _____ Last Name: LABARRERE
Address: 35 MAGNOLIA LANE City: PIPPLTOWN State: TN Zip Code: 38017
Purpose of Expenditure: CATERING
Amount of Expenditure: $ 250 Date of Expenditure: $ 11/4/24

Business or Organization Name: [redacted] SUPER CHEAP SIGNS **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 12800 ANDERSON MILL RD #D-1 City: CEDAR PARK State: TX Zip Code: 78613
Purpose of Expenditure: _____
Amount of Expenditure: $ 433.99 Date of Expenditure: $ 10/29/24

Business or Organization Name: OFFICE DEPOT **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1275 N GERMANTOWN RD City: GERMANTOWN State: TN Zip Code: 38138
Purpose of Expenditure: POLITICAL FLYERS
Amount of Expenditure: $ [redacted] 73.27 Date of Expenditure: $ 10/2-/24

Total Expenditures: $ 1891.75
(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: VICKI GANDEE
2. Reporting Period: Start Date: 10/29/24 End Date: 1/15/25
3. Total campaign expenditures from preceding page (enter $0 if first page) $ 1891.85

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: ______ **OR**
First Name: DERICK Middle Name: ______ Last Name: ROOT
Address: 6323 MEMPHIS ARLINGTON RD City: BARTLETT State: TN Zip Code: 38135
Purpose of Expenditure: PORTABLE LIGHT RENTAL
Amount of Expenditure: $ 120 Date of Expenditure: $ 11/4/24

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Total Expenditures: $ 2011.85
(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)