

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4/8/2018</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>BARB STURGEON</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>May 1, 2018</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route <u>5521 IRON GATE DR.</u> City <u>FRANKLIN</u> State <u>TN</u> Zip Code <u>37069</u> Phone <u>615 605 6140</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route _____ City _____ State _____ Zip Code _____ Phone _____			
5. OFFICE SOUGHT (include district number, if applicable) <u>County Commissioner D8</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Rob STURGEON</u>	
7. CATEGORY OR REPORT (Check one) ☒ FIRST QUARTER ☐ SECOND QUARTER ☐ THIRD QUARTER ☐ FOURTH QUARTER ☐ PRE-PRIMARY ☐ PRE-GENERAL ☐ MID-YEAR SUPPLEMENTAL ☐ YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>JAN 1 - 2018</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>MAR 31 - 2018</u>	
9. (Check one) a. ☐ 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. ☒ 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. <u><i>Barb Sturgeon</i></u> signature of candidate <u>4/5/18</u> date <u><i>Rob Sturgeon</i></u> signature of political treasurer <u>4/5/18</u> date			
11. WITNESS SIGNATURE <u><i>[Signature]</i></u> signature of witness <u>4/5/18</u> date <u><i>[Signature]</i></u> signature of witness <u>4/5/18</u> date			
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>1549.56</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>9715.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>1885.59</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>9378.97</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>0</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	

RECEIVED
APR 10 2018
WILLIAMSON CO.
ELECTION COMMISSION



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>BARB STURGEON</u>	14. REPORT COVERING THE PERIOD FROM: <u>Jan 1 - 2018</u> TO: <u>Mar 31 - 2018</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 1565

b. Itemized Contributions (over \$100 from each source this period) \$ 8150

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 9715

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 9715

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

"Raise The May" source fee	\$ <u>45.60</u>
"SLY Dial" Dial up service	\$ <u>40.00</u>
Stationary - STAPLES	\$ <u>42.33</u>
Decorations Kickoff	\$ <u>8.74</u>
MISC - tableware, utensils, cups etc - Kickoff	\$ <u>96.14</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 232.81

b. Itemized Expenditures (Over \$100 each payee this period) \$ 1651.78

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 1884.59

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 1884.59

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 0

b. Itemized in-kind contributions (over \$100 from each source this period) \$ 162.00

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 162.00

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.) (must be shown in item 12.f.) \$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BARB STURGEON				2. REPORT COVERING THE PERIOD FROM: 1/1/2018 TO: 3/31/2018	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name BOB BEAVER		Middle Name		Contribution Received For:	
Last Name/Organization Name				☒ Primary Election ☐ General Election	
Address 4332 Beekman Dr				☐ Runoff (Local Elections Only)	
City Nashville	State TN	Zip Code 37215	Date of Contribution 2/2/2018		Amount of Contribution \$300
Occupation NA					Aggregate This Election \$300
Employer RETIRED					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name CHRISTIAN Currey				☒ Primary Election ☐ General Election	
Address 1041 SNEED RD				☐ Runoff (Local Elections Only)	
City Franklin	State TN	Zip Code	Date of Contribution 3/16/2018		Amount of Contribution \$500
Occupation Veterinary RETAIL					Aggregate This Election \$500
Employer Self Employed					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name MARK Gunning				☒ Primary Election ☐ General Election	
Address 5532 IRON GATE				☐ Runoff (Local Elections Only)	
City Franklin	State TN	Zip Code 37069	Date of Contribution 3/4/18		Amount of Contribution \$750
Occupation NA					Aggregate This Election \$750
Employer RETIRED					
First Name JOHN		Middle Name BRIAN		Contribution Received For:	
Last Name/Organization Name PRESTON				☒ Primary Election ☐ General Election	
Address 2304 HARTS LANDMARK DR.				☐ Runoff (Local Elections Only)	
City Franklin	State TN	Zip Code	Date of Contribution 2/18/2018		Amount of Contribution \$1500
Occupation Financial Advisor					Aggregate This Election \$1500
Employer Abound Wealth					
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.)					3050



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BARB STURGEON				2. REPORT COVERING THE PERIOD FROM: 1/1/2018 TO: 3/31/2018	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 3050	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name TOM		Middle Name		Contribution Received For:	
Last Name/Organization Name TAYLOR				☒ Primary Election ☐ General Election	
Address 852 Lewisburg Pike				☐ Runoff (Local Elections Only)	
City Franklin	State	Zip Code	Date of Contribution 2/18/2018		Amount of Contribution \$150
Occupation Attorney / JUDGE					Aggregate This Election \$150
Employer / WILLIAMSON CTY					
First Name CYNDI		Middle Name		Contribution Received For:	
Last Name/Organization Name Miller				☒ Primary Election ☐ General Election	
Address 1209 Deven Rd				☐ Runoff (Local Elections Only)	
City Brentwood	State TN	Zip Code 37027	Date of Contribution 1/28/2018		Amount of Contribution \$1500
Occupation Homemaker					Aggregate This Election \$1500
Employer					
First Name TRACY		Middle Name		Contribution Received For:	
Last Name/Organization Name Miller				☒ Primary Election ☐ General Election	
Address 1209 Deven Rd				☐ Runoff (Local Elections Only)	
City Brentwood	State TN	Zip Code 37027	Date of Contribution 1/28/2018		Amount of Contribution \$1500
Occupation Executive					Aggregate This Election \$1500
Employer Healthmark Ventures					
First Name WILLIAM		Middle Name		Contribution Received For:	
Last Name/Organization Name MORGAN				☒ Primary Election ☐ General Election	
Address 3110 Del Rio Pike				☐ Runoff (Local Elections Only)	
City Franklin	State TN	Zip Code 37069	Date of Contribution 2/18/2018		Amount of Contribution \$250
Occupation PRESIDENT					Aggregate This Election \$250
Employer John Bouchard & Sons					
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.)					\$6450



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BARB STURGEON				2. REPORT COVERING THE PERIOD FROM: 1/1/2018 TO: 3/31/2018	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount: 6450
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name ALLEN		Middle Name		Contribution Received For:	
Last Name/Organization Name Deaver				☒ Primary Election ☐ General Election	
Address 1800 Grey Pointe Dr.				☐ Runoff (Local Elections Only)	
City Brentwood	State TN	Zip Code 37027	Date of Contribution 2/16/18		Amount of Contribution \$200
Occupation Executive / Business Owner					Aggregate This Election \$200
Employer Self employed					
First Name STUART		Middle Name		Contribution Received For:	
Last Name/Organization Name ANDERSON				☒ Primary Election ☐ General Election	
Address 101 Gillespie Dr Apt 13304				☐ Runoff (Local Elections Only)	
City Franklin	State TN	Zip Code 37067	Date of Contribution 3/2/2018		Amount of Contribution \$1000
Occupation					Aggregate This Election \$1000
Employer Retired					
First Name Richard		Middle Name		Contribution Received For:	
Last Name/Organization Name SANDSTROM				☒ Primary Election ☐ General Election	
Address 2020 Fieldstone Plwy Suite 900				☐ Runoff (Local Elections Only)	
City Franklin	State TN	Zip Code 37069	Date of Contribution March 28, 2018		Amount of Contribution \$250
Occupation Consultant					Aggregate This Election \$250
Employer Self Employed					
First Name DOUG		Middle Name		Contribution Received For:	
Last Name/Organization Name GRINDSTAFF				☒ Primary Election ☐ General Election	
Address				☐ Runoff (Local Elections Only)	
City Brentwood	State TN	Zip Code	Date of Contribution 3/1/18		Amount of Contribution \$250
Occupation Chairman / CEO					Aggregate This Election \$250
Employer Scott Services					
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.)					\$8150



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BARB SNIKEON				2. REPORT COVERING THE PERIOD FROM: 1/1/2018 TO: 3/31/2018	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)					
First Name Denise		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name BIRNBAUM		☒ Primary Election ☐ General Election		Value of In-Kind Contribution \$162.00	
Address 2833 Polo Club Rd.		Date of In-Kind Contribution 2/18/2018		Aggregate this Election \$162.00	
City Nashville		State TN		Zip Code 37221	
Occupation NA		Employer NA		Description of In-Kind Contribution Food for campaign kickoff	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name		☐ Primary Election ☐ General Election		Value of In-Kind Contribution	
Address		Date of In-Kind Contribution		Aggregate this Election	
City		State		Zip Code	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name		☐ Primary Election ☐ General Election		Value of In-Kind Contribution	
Address		Date of In-Kind Contribution		Aggregate this Election	
City		State		Zip Code	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name		☐ Primary Election ☐ General Election		Value of In-Kind Contribution	
Address		Date of In-Kind Contribution		Aggregate this Election	
City		State		Zip Code	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name		☐ Primary Election ☐ General Election		Value of In-Kind Contribution	
Address		Date of In-Kind Contribution		Aggregate this Election	
City		State		Zip Code	
Occupation		Employer		Description of In-Kind Contribution	
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to Item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in Item 22b. of summary.)					

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BARB SURGEON				2. REPORT COVERING THE PERIOD FROM: 1/1/2018 TO: 3/31/2018		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0	
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 COPY SOLUTION				PRINT pushcarts (campaign material)		\$273.13
Address 4091 Mallory Lane Ste 128						
City Franklin	State TN	Zip Code 37067				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Laurelbrooke HOA				Campaign Kickoff Facility Rental		\$150
Address						
City	State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name SIGN ROCKET				Campaign signs		\$340
Address 340 Broadway Ave						
City	State MN	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name KIM SWIFT				Photos		\$225
Address 2222 Isaac LN						
City Franklin	State TN	Zip Code 37064				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Home Depot				Sign Hardware		\$92.71
Address 70 W						
City Nashville	State TN	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name GO DADDY WEBSITE				Campaign website		\$104.75
Address 14455 N Hayden Rd Ste 219						
City	State AZ	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.)					\$1185.59	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BARB STURGEON		2. REPORT COVERING THE PERIOD FROM 1/1/2018 TO 3/31/2018	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount 1185.59	
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 CONSTANT CONTACT		BULK Email service/	147.48
Address 1401 Trapelo Rd			
City	State MA		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name COSTCO		Drinks + Refreshment Campaign Kickoff	181.94
Address Charlotte Pike			
City Nashville	State TN		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name GOOGLE		ADS- campaign promotion	136.77
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
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.)			1651.76

