

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 1/23/2018		2.a. NAME OF CANDIDATE OR COMMITTEE Karen Paris for Trustee	
2.b. IF COMMITTEE, NAME OF CANDIDATE Karen J Paris		3. ELECTION DATE 5/6/2014	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route 1516 Hampshire Place	City Thompson's Station	State TN	Zip Code 37179 Phone (615) 394-2516
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route 1516 Hampshire Pl	City Thompsons Station	State TN	Zip Code 37179-5413 Phone (615) 394-2516
5. OFFICE SOUGHT (include district number, if applicable) Trustee		6. NAME OF POLITICAL TREASURER (may be candidate) Karen Paris	
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 7/1/2017		8.b. ENDING DATE OF REPORTING PERIOD 1/15/2018	
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.			
_____ signature of candidate		_____ signature of political treasurer	
_____ signature of witness		_____ signature of witness	
_____ date		_____ date	
11. WITNESS SIGNATURE			
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$194.74	
b. TOTAL RECEIPTS THIS PERIOD		\$600.00	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$0.00	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$794.74	
e. TOTAL LOANS OUTSTANDING		\$0.00	
f. TOTAL OBLIGATIONS OUTSTANDING		\$0.00	

SEE 4B71-9003-38F
 01/23/18 - 10:53:56



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Karen J Paris	14. REPORT COVERING THE PERIOD <table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 50%;">FROM: 7/1/2017</td> <td style="border: none; width: 50%;">TO: 1/15/2018</td> </tr> </table>		FROM: 7/1/2017	TO: 1/15/2018
FROM: 7/1/2017	TO: 1/15/2018			

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period)	\$ 100.00
b. Itemized Contributions (over \$100 from each source this period)	\$ 500.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 600.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0.00

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0.00

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 600.00

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)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 0.00

b. Itemized Expenditures (Over \$100 each payee this period) \$ 0.00

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 0.00

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0.00

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 0.00

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 0.00

b. Itemized in-kind contributions (over \$100 from each source this period) \$ 0.00

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 0.00

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0.00

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0.00

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ 0.00



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Karen J Paris				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 \$0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name Old South Construction, LLC				☒ Primary Election ☐ General Election		↑ ↓ ↓ ↓ ↓ ↓
Address 245 Noah Dr				☐ Runoff (Local Elections Only)		
City Franklin		State TN	Zip Code 37064	Date of Contribution 09/28/17		Aggregate This Election \$500.00
Occupation Construction						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				☐ Primary Election ☐ General Election		
Address				☐ 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				☐ Primary Election ☐ General Election		
Address				☐ 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				☐ Primary Election ☐ General Election		
Address				☐ 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.)					\$500.00	

