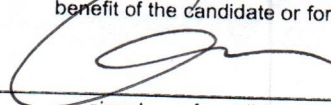
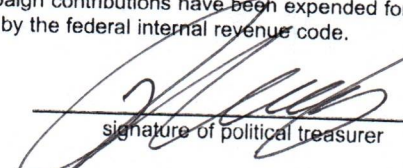
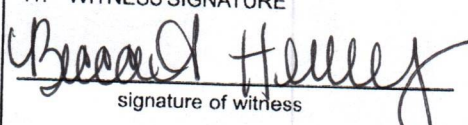
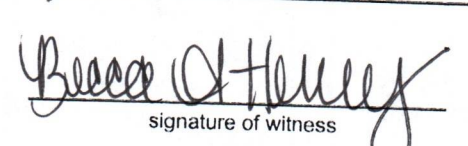


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>October 6, 2022</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Friends of Greg Sanford</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Greg Sanford</u>		3. ELECTION DATE	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>2000 Mallory Ln. St 130-382 Franklin, TN TN 37009 015.917.3020</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>7201 Prairie Falcon Dr. Arrington, TN 37014 015.300.0753</u>			
5. OFFICE SOUGHT (include district number, if applicable) <u>County Commissioner - District 5</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Nicholas Turney</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>July 26, 2022</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>September 30, 2022</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.			
 signature of candidate		 signature of political treasurer	
<u>10/7/22</u> date		<u>10.6.22</u> date	
11. WITNESS SIGNATURE			
 signature of witness		 signature of witness	
<u>10.6.22</u> date		<u>10.6.22</u> date	
12. SUMMARY			
RECEIVED OCT 06 2022 WILLIAMSON CO. ELECTION COMMISSION			
a. BALANCE ON HAND LAST REPORT		\$ <u>173.78</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>14,400.16</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>14,413.98</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>159.96</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>52,500-</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)

Friends of Greg Sanford

14. REPORT COVERING THE PERIOD

FROM: 7.26.22 TO: 9.30.22

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 0

b. Itemized Contributions (over \$100 from each source this period) \$ 0

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 0

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 14,400-

17. INTEREST RECEIVED THIS REPORTING PERIOD \$.16

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 14,400.16

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) \$ _____

b. Itemized Expenditures (Over \$100 each payee this period) \$ 14,413.98

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 14,413.98

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 14,413.98

22. IN-KIND CONTRIBUTIONS

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

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

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 0

23. OBLIGATIONS

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

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

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ 0



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Friends of Greg Sanford				2. REPORT COVERING THE PERIOD FROM: 7.26.22 TO: 9.30.22			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name Greg		Middle Name		Outstanding Loan Balance (Beginning of Period) 38,100	Loans Received 14,400	Loan Payments 0	Outstanding Loan Balance (End of Period) 52,500
Last Name/Organization Name Sanford				Loan Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		Date of Loan 8.1.22 (900) 8.10.22 (1,500) 8.2.22 (900) 8.11.22 (500) 8.3.22 (1,500) 8.31.22 (1,000)	
Address 7201 Prairie Falcon Dr.							
City Arrington		State TN		Zip Code 37014			
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)							
First Name Greg		Middle Name		First Name Greg		Middle Name	
Last Name/Organization Name Sanford				Last Name/Organization Name Sanford			
Address 7201 Prairie Falcon Dr.				Address 7201 Prairie Falcon Dr.			
City Arrington		State TN		City Arrington		State TN	
Zip Code 37014				Zip Code 37014			
Amount Guaranteed Outstanding \$9,000				Amount Guaranteed Outstanding \$500			
First Name Greg		Middle Name		First Name Greg		Middle Name	
Last Name/Organization Name Sanford				Last Name/Organization Name Sanford			
Address 7201 Prairie Falcon Dr.				Address 7201 Prairie Falcon Dr.			
City Arrington		State TN		City Arrington		State TN	
Zip Code 37014				Zip Code 37014			
Amount Guaranteed Outstanding \$900				Amount Guaranteed Outstanding \$1,000			
First Name Greg		Middle Name		First Name		Middle Name	
Last Name/Organization Name Sanford				Last Name/Organization Name			
Address 7201 Prairie Falcon Dr.				Address			
City Arrington		State TN		City		State	
Zip Code 37014				Zip Code			
Amount Guaranteed Outstanding \$1,500				Amount Guaranteed Outstanding			
First Name Greg		Middle Name		First Name		Middle Name	
Last Name/Organization Name Sanford				Last Name/Organization Name			
Address 7201 Prairie Falcon Dr.				Address			
City Arrington		State TN		City		State	
Zip Code 37014				Zip Code			
Amount Guaranteed Outstanding \$1,500				Amount Guaranteed Outstanding			
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16, on summary page.) (Total loan payments should also be shown in item 20, on summary page.) (Total outstanding loan balance should also be shown in item 12.e, on front page.)							
Outstanding Loan Balance (Beginning of Period) 38,100		Loans Received 14,400		Loan Payments 0		Outstanding Loan Balance (End of Period) 52,500	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Friends of Greg Sanford		2. REPORT COVERING THE PERIOD FROM: 7.26.22 TO: 9.30.22	
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 Tennessee Republican Party		Party mailer	\$3,929-
Address 45 White Bridge Rd # 414			
City Nashville	State TN Zip Code 37205		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name First Horizon		Wire transfer fee	\$25-
Address 7062 Bakers Bridge Ave			
City Franklin	State TN Zip Code 37067		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name WAKM Radio		radio ads	\$2,000-
Address 1333 West Main St.			
City Franklin	State TN Zip Code 37064		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Rasi Haire		social media ads	\$350-
Address PO BOX 93			
City Arrington	State TN Zip Code 37014		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Brightside		Internet advertising	\$2,269.55
Address 7209 Haley Industrial Blvd St 230			
City Nolensville	State TN Zip Code 37135		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Williamson Herald		newspaper ads	\$2,000-
Address 1117 Columbia Ave.			
City Franklin	State TN Zip Code 37064		
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.)			\$10,573.55



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Friends of Greg Sanford		2. REPORT COVERING THE PERIOD FROM: 7.26.22 TO: 9.30.22	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$10,573.55
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name Jonathan	Middle Name	Purpose of Expenditure facebook advertising	Amount of Expenditure \$350-
Last Name/Business Name Pack			
Address 8259 Haley Lane			
City College Grove	State TN	Zip Code 37040	
First Name Laura	Middle Name	Purpose of Expenditure Campaign work	Amount of Expenditure \$690-
Last Name/Business Name Letz			
Address 2209 Maricopa Ct.			
City Nolensville	State TN	Zip Code 37135	
First Name Sam	Middle Name	Purpose of Expenditure Campaign work	Amount of Expenditure \$725-
Last Name/Business Name O'Brien			
Address 1002 Dortch Lane			
City Nolensville	State TN	Zip Code 37135	
First Name	Middle Name	Purpose of Expenditure Statement fee	Amount of Expenditure \$2-
Last Name/Business Name First Horizon			
Address 7062 Bakers Bridge Ave.			
City Franklin	State TN	Zip Code 37067	
First Name Jeff	Middle Name	Purpose of Expenditure Campaign management fee	Amount of Expenditure \$2,500-
Last Name/Business Name Hines			
Address 4033 Williford Way			
City Spring Hill	State TN	Zip Code 37174	
First Name	Middle Name	Purpose of Expenditure Statement fee	Amount of Expenditure \$2-
Last Name/Business Name First Horizon			
Address 7062 Bakers Bridge Ave.			
City Franklin	State TN	Zip Code 37067	
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.)			\$14,842.55

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Friends of Greg Sanford			2. REPORT COVERING THE PERIOD FROM: 7.26.22 TO: 9.30.22	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$14,842.55
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 advertising refund		Amount of Expenditure \$-428.57
Last Name/Business Name Lamar Media				
Address 1993 Southerland Dr.				
City Nashville	State TN			
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			
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.)				\$14,413.98