

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 7/27/2018		2.a. NAME OF CANDIDATE OR COMMITTEE Katie Darby													
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE 2018-08-02													
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 1407 Holmes Ct Nolensville TN 37135															
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) School Board, Zone 4		6. NAME OF POLITICAL TREASURER (may be candidate) Dotty Grattan													
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 2018-07-01		8.b. ENDING DATE OF REPORTING PERIOD 2018-07-26													
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 date															
11. WITNESS SIGNATURE signature of witness signature of witness date date															
12. SUMMARY <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. BALANCE ON HAND LAST REPORT</td> <td style="width: 20%; text-align: right;">\$22.59</td> </tr> <tr> <td>b. TOTAL RECEIPTS THIS PERIOD</td> <td style="text-align: right;">\$272.39</td> </tr> <tr> <td>c. TOTAL DISBURSEMENTS THIS PERIOD</td> <td style="text-align: right;">\$294.98</td> </tr> <tr> <td>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>e. TOTAL LOANS OUTSTANDING</td> <td style="text-align: right;">\$294.98</td> </tr> <tr> <td>f. TOTAL OBLIGATIONS OUTSTANDING</td> <td style="text-align: right;">\$0.00</td> </tr> </table>				a. BALANCE ON HAND LAST REPORT	\$22.59	b. TOTAL RECEIPTS THIS PERIOD	\$272.39	c. TOTAL DISBURSEMENTS THIS PERIOD	\$294.98	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$0.00	e. TOTAL LOANS OUTSTANDING	\$294.98	f. TOTAL OBLIGATIONS OUTSTANDING	\$0.00
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d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$0.00														
e. TOTAL LOANS OUTSTANDING	\$294.98														
f. TOTAL OBLIGATIONS OUTSTANDING	\$0.00														

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SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Katie Darby	14. REPORT COVERING THE PERIOD FROM: 2018-07-01 TO: 2018-07-26	
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ \$0.00

b. Itemized Contributions (over \$100 from each source this period) \$ \$0.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ \$0.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ \$272.39

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ \$0.00

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ \$272.39

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) \$ \$294.98

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ \$294.98

20. LOAN REPAYMENTS MADE THIS PERIOD \$ \$0.00

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ \$294.98

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 in item 12.f.) \$ \$0.00



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Katie Darby			2. REPORT COVERING THE PERIOD FROM: 2018-07-01 TO: 2018-07-26		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$0.00	
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 Yard Signs	Amount of Expenditure \$294.98
Last Name/Business Name Good Guys Signs					
Address 1032 E. Hillsborough Ave					
City Tampa		State FL	Zip Code 33604		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	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.)					\$294.98



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE						2. REPORT COVERING THE PERIOD						
Katie Darby						FROM: 2018-07-01		TO: 2018-07-26				
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 Katie			Middle Name		Outstanding Loan Balance (Beginning of Period) \$22.59		Loans Received \$272.39		Loan Payments \$0.00			
Last Name/Organization Name Darby					Outstanding Loan Balance (End of Period) \$294.98							
Address 1407 Holmes Ct					Loan Received For:				Date of Loan 2018-07-02			
City Nolensville			State TN	Zip Code 37135		☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)						
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)												
First Name			Middle Name		First Name			Middle Name				
Last Name/Organization Name					Last Name/Organization Name							
Address					Address							
City			State	Zip Code		City			State	Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
First Name			Middle Name		First Name			Middle Name				
Last Name/Organization Name					Last Name/Organization Name							
Address					Address							
City			State	Zip Code		City			State	Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
First Name			Middle Name		First Name			Middle Name				
Last Name/Organization Name					Last Name/Organization Name							
Address					Address							
City			State	Zip Code		City			State	Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
First Name			Middle Name		First Name			Middle Name				
Last Name/Organization Name					Last Name/Organization Name							
Address					Address							
City			State	Zip Code		City			State	Zip Code		
Amount Guaranteed Outstanding					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) \$22.59		Loans Received \$272.39		Loan Payments \$0.00		Outstanding Loan Balance (End of Period) \$294.98	

