

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT January 25, 2023		2.a. NAME OF CANDIDATE OR COMMITTEE Friends of Daron Hall	
2.b. IF COMMITTEE, NAME OF CANDIDATE Daron Hall		3. ELECTION DATE May 5, 2026	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route 6647 Holt Rd.	City Nashville	State TN	Zip Code Phone 37211 615-831-7458
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) Sheriff, Davidson County		6. NAME OF POLITICAL TREASURER (may be candidate) Lucy Foutch	
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 October 1, 2022		8.b. ENDING DATE OF REPORTING PERIOD January 15, 2022	
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	1-25-23 date	 signature of political treasurer	1/25/23 date
11. WITNESS SIGNATURE			
 signature of witness	1/25/23 date	 signature of witness	1/25/23 date
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	\$ 109,383.09		
b. TOTAL RECEIPTS THIS PERIOD	\$ 1,240.00		
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 6,370.20		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ 104,252.89		
e. TOTAL LOANS OUTSTANDING	\$ 0.00		
f. TOTAL OBLIGATIONS OUTSTANDING	\$ 0.00		



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Friends of Daron Hall	14. REPORT COVERING THE PERIOD <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-bottom: 1px solid black;">FROM: 10/1/22</td> <td style="width: 50%; border-bottom: 1px solid black;">TO: 1/15/23</td> </tr> </table>		FROM: 10/1/22	TO: 1/15/23
FROM: 10/1/22	TO: 1/15/23			

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period)	\$ 190.00
b. Itemized Contributions (over \$100 from each source this period)	\$ 1,050.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 1,240.00

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.) \$ 1,240.00

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)

See Attached

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

Total of Expenditures (\$100 or less each payee) \$ 136.70

b. Itemized Expenditures (Over \$100 each payee this period) \$ 6,233.50

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 6,370.20

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0.00

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 6,370.20

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



1. Name of Candidate or Committee

Friends of Daron Hall

Disbursements
Schedule 19a

Cloud Storage	5.97
Donation	100
PayPal Expense	30.73

Total \$ 136.70

Itemized Statement of Contributions - Candidate

[illegible]

Itemized Statement of In-Kind Contributions - Candidate

[illegible]

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Friends of Daron Hall				2. REPORT COVERING THE PERIOD FROM: 10/1/22 TO: 1/15/23			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (bans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
Last Name/Organization Name							
Address				Loan Received For: ☐ Primary Election ☐ General Election ☐ Other Election (Specify)		Date of Loan	
City	State	Zip Code					
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			
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 23, on summary page.)				Outstanding Loan Balance (Beginning of Period)		Loans Received	
				0		0	
				0		0	
				0		0	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
Friends of Daron Hall				FROM: 10/1/22		TO: 1/15/23	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 24b on summary page)				0	0	0	0

