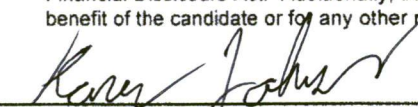
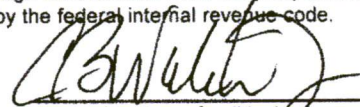
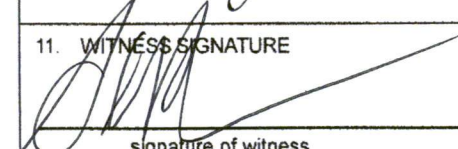
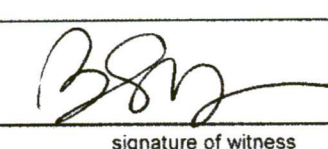


# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                          |             |                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------|
| 1. DATE OF REPORT<br>April 10, 2018                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 2.a. NAME OF CANDIDATE OR COMMITTEE<br>Karen Johnson for Register of Deeds                                               |             |                       |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | ELECTION DATE<br>May 1, 2018                                                                                             |             |                       |
| 4.a. CAMPAIGN ADDRESS AND PHONE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                          |             |                       |
| Street or Rural Route<br>P.O. Box 17131                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | City<br>Nashville                                                                                                        | State<br>TN | Zip Code<br>37217     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                          |             | Phone<br>615-977-6721 |
| 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                          |             |                       |
| Street or Rural Route<br>2928 Moss Spring Dr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | City<br>Antioch                                                                                                          | State<br>TN | Zip Code<br>37013     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                          |             | Phone                 |
| 5. OFFICE SOUGHT (include district number, if applicable)<br>Register of Deeds                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | 6. NAME OF POLITICAL TREASURER (may be candidate)<br>Charles Welch                                                       |             |                       |
| 7. CATEGORY OR REPORT (Check one)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                          |             |                       |
| <input checked="" type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL                                                                                                                                                                                                |  |                                                                                                                          |             |                       |
| 8.a. BEGINNING DATE OF REPORTING PERIOD<br>1/16/2018                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | 8.b. ENDING DATE OF REPORTING PERIOD<br>3/31/2018                                                                        |             |                       |
| 9. (Check one)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                          |             |                       |
| a. <input type="checkbox"/> 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.)<br>b. <input type="checkbox"/> 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. |  |                                                                                                                          |             |                       |
| <br>signature of candidate                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <br>signature of political treasurer |             | 4/10/18<br>date       |
| <br>signature of witness                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <br>signature of witness             |             | 4/10/18<br>date       |
| 11. WITNESS SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                          |             |                       |
| 12. SUMMARY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                          |             |                       |
| a. BALANCE ON HAND LAST REPORT .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | \$ 18,808.38                                                                                                             |             |                       |
| b. TOTAL RECEIPTS THIS PERIOD .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | \$ 21,315.00                                                                                                             |             |                       |
| c. TOTAL DISBURSEMENTS THIS PERIOD .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | \$ 15,409.06                                                                                                             |             |                       |
| d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | \$ 24,714.23                                                                                                             |             |                       |
| e. TOTAL LOANS OUTSTANDING .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | \$ 12,500                                                                                                                |             |                       |
| f. TOTAL OBLIGATIONS OUTSTANDING .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | \$ 0.00                                                                                                                  |             |                       |



## SUMMARY PAGE - CANDIDATE

|                                                                                      |                                                                                                                                                                                                                           |  |                |              |
|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------|--------------|
| <b>13. NAME OF CANDIDATE OR COMMITTEE (In Full)</b><br>Johnson for Register of Deeds | <b>14. REPORT COVERING THE PERIOD</b><br><table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">FROM 1/16/2018</td> <td style="width: 50%; border: none;">TO 3/31/2018</td> </tr> </table> |  | FROM 1/16/2018 | TO 3/31/2018 |
| FROM 1/16/2018                                                                       | TO 3/31/2018                                                                                                                                                                                                              |  |                |              |

**RECEIPTS**

15. CONTRIBUTIONS (other than loans and interest)

|                                                                                    |                     |
|------------------------------------------------------------------------------------|---------------------|
| a. Unitemized Contributions (\$100 or less from each source this period) .....     | \$ <u>2,395.00</u>  |
| b. Itemized Contributions (over \$100 from each source this period) .....          | \$ <u>14,920.00</u> |
| c. TOTAL CONTRIBUTIONS (other than loans and interest) (add 15.a. and 15.b.) ..... | \$ <u>17,315.00</u> |

16. LOANS RECEIVED THIS REPORTING PERIOD .....

17. INTEREST RECEIVED THIS REPORTING PERIOD .....

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

|  |                     |
|--|---------------------|
|  | \$ <u>4,000.00</u>  |
|  | \$ <u>0.00</u>      |
|  | \$ <u>21,315.00</u> |

**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)

|                 |                  |
|-----------------|------------------|
| Food & Beverage | \$ <u>150.00</u> |
| Postage         | \$ <u>41.00</u>  |
| Sign Materials  | \$ <u>84.34</u>  |
|                 | \$               |
|                 | \$               |
|                 | \$               |
|                 | \$               |
|                 | \$               |
|                 | \$               |

Total of Expenditures \$100 or less each payee) .....

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

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

20. LOAN REPAYMENTS MADE THIS PERIOD .....

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

|  |                     |
|--|---------------------|
|  | \$ <u>210.00</u>    |
|  | \$ <u>14,145.62</u> |
|  | \$ <u>14,355.62</u> |
|  | \$ <u>0.00</u>      |
|  | \$ <u>14,355.62</u> |

**22. IN-KIND CONTRIBUTIONS**

|                                                                                        |                  |
|----------------------------------------------------------------------------------------|------------------|
| a. Unitemized in-kind contributions (\$100 or less from each source this period) ..... | \$ <u>0.00</u>   |
| b. Itemized in-kind contributions (over \$100 from each source this period) .....      | \$ <u>122.02</u> |
| c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) .....        | \$ <u>122.02</u> |

**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.) ..... | \$ <u>0.00</u> |





# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

|                                                                                                                                                                                                                          |       |             |                      |                                                                                     |                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------|----------------------|-------------------------------------------------------------------------------------|-------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE<br>Johnson for Register of Deeds                                                                                                                                                       |       |             |                      | 2. REPORT COVERING THE PERIOD<br>FROM: 1/16/2018 TO: 3/31/2018                      |                         |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)                                                                                                                          |       |             |                      |                                                                                     | Amount                  |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)                                                                                           |       |             |                      |                                                                                     |                         |
| First Name                                                                                                                                                                                                               |       | Middle Name |                      | Contribution Received For:                                                          |                         |
| Last Name/Organization                                                                                                                                                                                                   |       |             |                      | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                         |
| Address                                                                                                                                                                                                                  |       |             |                      | <input type="checkbox"/> Runoff (Local Elections Only)                              |                         |
| City                                                                                                                                                                                                                     | State | Zip Code    | Date of Contribution |                                                                                     | Amount of Contribution  |
| Occupation                                                                                                                                                                                                               |       |             |                      |                                                                                     | Aggregate This Election |
| Employer                                                                                                                                                                                                                 |       |             |                      |                                                                                     |                         |
| First Name«Next Record»                                                                                                                                                                                                  |       | Middle Name |                      | Contribution Received For:                                                          |                         |
| Last Name/Organization                                                                                                                                                                                                   |       |             |                      | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                         |
| Address                                                                                                                                                                                                                  |       |             |                      | <input type="checkbox"/> Runoff (Local Elections Only)                              |                         |
| City                                                                                                                                                                                                                     | State | Zip Code    | Date of Contribution |                                                                                     | Amount of Contribution  |
| Occupation                                                                                                                                                                                                               |       |             |                      |                                                                                     | Aggregate This Election |
| Employer                                                                                                                                                                                                                 |       |             |                      |                                                                                     |                         |
| First Name«Next Record»                                                                                                                                                                                                  |       | Middle Name |                      | Contribution Received For:                                                          |                         |
| Last Name/Organization                                                                                                                                                                                                   |       |             |                      | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                         |
| Address                                                                                                                                                                                                                  |       |             |                      | <input type="checkbox"/> Runoff (Local Elections Only)                              |                         |
| City                                                                                                                                                                                                                     | State | Zip Code    | Date of Contribution |                                                                                     | Amount of Contribution  |
| Occupation                                                                                                                                                                                                               |       |             |                      |                                                                                     | Aggregate This Election |
| Employer                                                                                                                                                                                                                 |       |             |                      |                                                                                     |                         |
| First Name«Next Record»                                                                                                                                                                                                  |       | Middle Name |                      | Contribution Received For:                                                          |                         |
| Last Name/Organization                                                                                                                                                                                                   |       |             |                      | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                         |
| Address                                                                                                                                                                                                                  |       |             |                      | <input type="checkbox"/> Runoff (Local Elections Only)                              |                         |
| City                                                                                                                                                                                                                     | State | Zip Code    | Date of Contribution |                                                                                     | Amount of Contribution  |
| Occupation                                                                                                                                                                                                               |       |             |                      |                                                                                     | Aggregate This Election |
| Employer                                                                                                                                                                                                                 |       |             |                      |                                                                                     |                         |
| First Name«Next Record»                                                                                                                                                                                                  |       | Middle Name |                      | Contribution Received For:                                                          |                         |
| Last Name/Organization                                                                                                                                                                                                   |       |             |                      | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                         |
| Address                                                                                                                                                                                                                  |       |             |                      | <input type="checkbox"/> Runoff (Local Elections Only)                              |                         |
| City                                                                                                                                                                                                                     | State | Zip Code    | Date of Contribution |                                                                                     | Amount of Contribution  |
| Occupation                                                                                                                                                                                                               |       |             |                      |                                                                                     | Aggregate This Election |
| Employer                                                                                                                                                                                                                 |       |             |                      |                                                                                     |                         |
| 5. TOTAL ITEMIZED CONTRIBUTIONS<br>(Carry forward to item 3. of next page if additional pages of this form are used.)<br>(If this is the last page of contributions, this amount must be shown in item 15b. of summary.) |       |             |                      |                                                                                     |                         |



Johnson for Register of Deeds  
Itemized Donors (1/16/2018- 3/31/2018)

| Date  | Amount   | F_Name       | L_Name                           | Add_1                     | City        | ST_Zip   | Employer                       | Occupation             |
|-------|----------|--------------|----------------------------------|---------------------------|-------------|----------|--------------------------------|------------------------|
| 1/25  | \$1,000  |              | Ryman Hospitality Properties PAC | 1 Gaylord Drive           | Nashville   | TN 37214 |                                |                        |
| 2/5   | \$1,500  | Jack         | Cawthon                          | 4010 Valley Rd            | Nashville   | TN 37205 | Jack's BBQ                     | Owner                  |
| 2/7   | \$120    | Theo         | Morrison                         | PO Box 58686              | Nashville   | TN 37205 | Self                           | Consultant             |
| 2/8   | \$500    | William      | Freeman                          | 6114 Hillsboro Pike       | Nashville   | TN 37215 | Freeman Webb Com               | Real Estate            |
| 2/9   | \$1,000  |              | H.G. Hill Realty PAC             | 3011 Armory Drive         | Nashville   | TN 37204 |                                |                        |
| 2/9   | \$250    | Ralph        | Thompson                         | 6560 Broken Bow Dr        | Antioch     | TN 37013 | Metro Schools                  | Vice Principal         |
| 2/12  | \$150    | Kenneth      | McMichael Sr.                    | 540 Pippin Drive          | Nashville   | TN 37013 | First Tennessee Bank           | Credit Analyst Sr      |
| 2/15  | \$150    | Jacky        | Akbari                           | 402 Springhouse Ct        | Franklin    | TN 37067 | City of Nashville              | Government Relations   |
| 2/16  | \$1,000  | Samuel       | Howard                           | 5320 Cherry Blossom Trail | Nashville   | TN 37215 | Retired                        | Retired                |
| 2/19  | \$300    | Bob          | Mendes                           | 416 Fairfax Avenue        | Nashville   | TN 37212 | Waypoint Law PLLC              | Attorney               |
| 2/21  | \$250    | Lenieva      | Head                             | 1307 Bell Rd              | Antioch     | TN 37013 | Welcome Home Realty            | Principal Broker Owner |
| 2/21  | \$250    | Marty        | Dickens                          | 4410 Harding Place        | Nashville   | TN 37205 | Not Employed                   | Not Employed           |
| 2/26  | \$500    | William      | Pinkston                         | 937 Battlefield Drive     | Nashville   | TN 37204 | Self                           | Consultant             |
| 3/2   | \$250    | Howard       | Gentry                           | 4109 Kings Lane           | Nashville   | TN 37218 | Davidson County, TN            | Criminal Court Clerk   |
| 3/2   | \$200    | Ildie        | Ogundiya                         | 1801 Church St            | Nashville   | TN 37203 | Self                           | DDS                    |
| 3/7   | \$1,000  | Roy          | Dale                             | 516 Heather Place         | Nashville   | TN 37204 | Dale and Associates            | Principal              |
| 3/16  | \$500    | Mary Frances | Rudy                             | 2613 Belmont Blvd         | Nashville   | TN 37212 | Self                           | Attorney               |
| 3/16  | \$1,500  | Billy        | King                             | 307 Rembrandt Drive       | Old Hickory | TN 37138 | CIC Inc.                       | Consultant             |
| 3/17  | \$1,000  |              | Community Health Systems, Inc    | 4000 Meridian Blvd        | Franklin    | TN 37067 |                                |                        |
| 3/18  | \$1,500  |              | Ferrell Automotive               | 238 Lisa Ln               | Nashville   | TN 37210 |                                |                        |
| 3/18  | \$250    |              | Maynard Group PAC                | 315 Deaderick Street      | Nashville   | TN 37238 |                                |                        |
| 3/21  | \$250    | Bill         | Purcell                          | P.O. Box 60331            | Nashville   | TN       | Attorney                       | Self                   |
| 3/25  | \$250    |              | Belle Meade Title & Escrow       | 109 Kenner Ave            | Nashville   | TN 37205 |                                |                        |
| 3/25  | \$250    |              | Eckhardt Exchange Corp           | 109 Kenner Ave            | Nashville   | TN 37205 |                                |                        |
| 3/27  | \$250    | Linda        | Lance                            | 5640 Clovermeade Dr       | Brentwood   | TN 37027 | Best Effort                    | Best Effort            |
| 3/27  | \$500    | Parker       | Sherrill                         | 713 Vail Ct               | Nashville   | TN 37215 | Public Policy Management Group | Government Relations   |
| 3/27  | \$250    | R.W.         | Tardy                            | 1934 Old Hickory Blvd     | Brentwood   | TN 37027 | HCA                            | Government Relations   |
| Total | \$14,920 |              |                                  |                           |             |          |                                |                        |



# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

|                                                                                                                                                                                                                                          |  |                         |  |                                                                                                                           |          |                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------|--|---------------------------------------------------------------------------------------------------------------------------|----------|-------------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE<br>Johnson for Register of Deeds                                                                                                                                                                       |  |                         |  | 2. REPORT COVERING THE PERIOD<br>FROM: 1/16/2018 TO: 3/31/2018                                                            |          |                               |
| 3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)                                                                                                                                           |  |                         |  |                                                                                                                           | Amount   |                               |
| 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 Robert                                                                                                                                                                                                                        |  | Middle Name             |  | In-Kind Contribution Received For:<br><input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |          | Value of In-Kind Contribution |
| Last Name/Organization Name<br>Greene                                                                                                                                                                                                    |  |                         |  | <input type="checkbox"/> Runoff (Local Elections Only)                                                                    |          | \$122.02                      |
| Address 4121 Clarksville Pike; #8;                                                                                                                                                                                                       |  |                         |  | Date of In-Kind Contribution 3/3/2018                                                                                     |          | Aggregate this Election       |
| City Nashville                                                                                                                                                                                                                           |  | State TN Zip Code 37218 |  | Description of In-Kind Contribution                                                                                       |          |                               |
| Occupation Attorney                                                                                                                                                                                                                      |  | Employer Self           |  | Sign Materials                                                                                                            |          |                               |
| First Name                                                                                                                                                                                                                               |  | Middle Name             |  | In-Kind Contribution Received For:<br><input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |          | Value of In-Kind Contribution |
| Last Name/Organization Name                                                                                                                                                                                                              |  |                         |  | <input type="checkbox"/> Runoff (Local Elections Only)                                                                    |          |                               |
| Address                                                                                                                                                                                                                                  |  |                         |  | Date of In-Kind Contribution                                                                                              |          | Aggregate this Election       |
| City                                                                                                                                                                                                                                     |  | State Zip Code          |  | Description of In-Kind Contribution                                                                                       |          |                               |
| Occupation                                                                                                                                                                                                                               |  | Employer                |  |                                                                                                                           |          |                               |
| First Name                                                                                                                                                                                                                               |  | Middle Name             |  | In-Kind Contribution Received For:<br><input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |          | Value of In-Kind Contribution |
| Last Name/Organization Name                                                                                                                                                                                                              |  |                         |  | <input type="checkbox"/> Runoff (Local Elections Only)                                                                    |          |                               |
| Address                                                                                                                                                                                                                                  |  |                         |  | Date of In-Kind Contribution                                                                                              |          | Aggregate this Election       |
| City                                                                                                                                                                                                                                     |  | State Zip Code          |  | Description of In-Kind Contribution                                                                                       |          |                               |
| Occupation                                                                                                                                                                                                                               |  | Employer                |  |                                                                                                                           |          |                               |
| First Name                                                                                                                                                                                                                               |  | Middle Name             |  | In-Kind Contribution Received For:<br><input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |          | Value of In-Kind Contribution |
| Last Name/Organization Name                                                                                                                                                                                                              |  |                         |  | <input type="checkbox"/> Runoff (Local Elections Only)                                                                    |          |                               |
| Address                                                                                                                                                                                                                                  |  |                         |  | Date of In-Kind Contribution                                                                                              |          | Aggregate this Election       |
| City                                                                                                                                                                                                                                     |  | State Zip Code          |  | Description of In-Kind Contribution                                                                                       |          |                               |
| Occupation                                                                                                                                                                                                                               |  | Employer                |  |                                                                                                                           |          |                               |
| First Name                                                                                                                                                                                                                               |  | Middle Name             |  | In-Kind Contribution Received For:<br><input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |          | Value of In-Kind Contribution |
| Last Name/Organization Name                                                                                                                                                                                                              |  |                         |  | <input type="checkbox"/> Runoff (Local Elections Only)                                                                    |          |                               |
| Address                                                                                                                                                                                                                                  |  |                         |  | Date of In-Kind Contribution                                                                                              |          | Aggregate this Election       |
| City                                                                                                                                                                                                                                     |  | State Zip Code          |  | Description of In-Kind Contribution                                                                                       |          |                               |
| Occupation                                                                                                                                                                                                                               |  | Employer                |  |                                                                                                                           |          |                               |
| 5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS<br>(Carry forward to item 3. of next page if additional pages of this form are used.)<br>(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.) |  |                         |  |                                                                                                                           | \$122.02 |                               |

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

|                                                                                                                                                                                    |       |                                                 |                        |                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------|------------------------|-----------------------|
| 1 NAME OF CANDIDATE OR COMMITTEE<br>Johnson for Register of Deeds                                                                                                                  |       | 2 R E P O R T C O V E R I N G T H E P E R I O D |                        |                       |
|                                                                                                                                                                                    |       | FROM: 1/16/2018                                 | TO: 3/31/2018          |                       |
| 3 TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)                                                                                      |       |                                                 | Amount<br>\$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 | 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                                        |                        |                       |
| 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 )<br>(If this is the last page of expenditures, this amount must be shown in item 19b of summary ) |       |                                                 |                        |                       |



Johnson for Register of Deeds  
Itemized Expenses (1/16/2018-3/31/2018)

| Date    | Amount      | F_Name | L_Name/Company          | Address                                                   | Purpose               |
|---------|-------------|--------|-------------------------|-----------------------------------------------------------|-----------------------|
| 1/18/18 | \$250.00    | John   | Smith                   | PO Box 22363; Nashville, TN 37202                         | Printing              |
| 2/5/18  | \$120.18    |        | Printing Etc            | 1100 Menzler Rd; Nashville, TN 37210                      | Banners               |
| 2/5/18  | \$120.18    |        | Printing Etc            | 1100 Menzler Rd; Nashville, TN 37210                      | Lapel Stickers        |
| 2/5/18  | \$32.78     |        | Printing Etc            | 1100 Menzler Rd; Nashville, TN 37210                      | Posters / Stickers    |
| 2/5/18  | \$1,000.00  |        | Thomas Lindsey Group    | PO Box 150724; Nashville, TN 37215                        | Consulting            |
| 2/7/18  | \$3,130.00  | John   | Smith                   | PO Box 22363; Nashville, TN 37203                         | Yard Signs            |
| 2/9/18  | \$23.00     |        | Act Blue                | PO Box 441146; Somerville, MA 02147                       | Online Processing Fee |
| 2/12/18 | \$2,500.00  | Robert | West                    | 45 Vantage Way; Nashville, TN 37228                       | Campaign Services     |
| 3/1/18  | \$500.00    |        | Thomas Lindsey Group    | PO Box 150724; Nashville, TN 37215                        | Consulting            |
| 3/2/18  | \$2,500.00  | Robert | West                    | 45 Vantage Way; Nashville, TN 37228                       | Campaign Services     |
| 3/8/18  | \$848.62    | Norm   | Hanson                  | 1923 Randolph Place; Nashville, TN 37215                  | Signs                 |
| 3/8/18  | \$1,405.00  | John   | Smith                   | PO Box 22363; Nashville, TN 37204                         | Banners               |
| 3/9/18  | \$70.11     |        | Act Blue                | PO Box 441146; Somerville, MA 02147                       | Online Processing Fee |
| 3/12/18 | \$91.30     | Norm   | Hanson                  | 1923 Randolph Place; Nashville, TN 37215                  | Signs                 |
| 3/16/18 | \$492.00    |        | Fisk University         | 1000 17th Ave N, Nashville, TN 37208                      | Facility Rental Fee   |
| 3/19/18 | \$1,072.83  |        | American Press Printing | 2410 Cruze St; Nashville, TN 37211                        | Signs. Stakes. Cards  |
| 3/19/18 | \$550.00    | John   | Smith                   | PO Box 22363; Nashville, TN 37205                         | Signs + Flyers        |
| 3/20/18 | \$420.44    |        | Logo My Logo            | 3354 Perimeter Hill Drive; Suite 112; Nashville, TN 37211 | Flyers                |
| TOTAL   | \$15,126.44 |        |                         |                                                           |                       |

7/9

# ITEMIZED STATEMENT OF LOANS - CANDIDATE

|                                                                                                                                                                                                                                   |             |                                                   |                                                                                                                                               |                                                   |                                             |                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------|------------------|
| 1 NAME OF CANDIDATE OR COMMITTEE                                                                                                                                                                                                  |             |                                                   |                                                                                                                                               |                                                   | 2 REPORT COVERING THE PERIOD                |                  |
| Johnson for Register of Deeds                                                                                                                                                                                                     |             |                                                   |                                                                                                                                               |                                                   | FROM: 1/16/2018                             | TO: 03/31/2018   |
| 3 COMPLETE THE APPROPRIATE TERMS 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                                                                                                                                                                                                                        | Middle Name | Outstanding Loan Balance<br>(Beginning of Period) | Loans<br>Received                                                                                                                             | Loan<br>Payments                                  | Outstanding Loan Balance<br>(End of Period) |                  |
| Karen                                                                                                                                                                                                                             |             | \$8,500.00                                        | \$4,000.00                                                                                                                                    | \$0.00                                            | \$12,500.00                                 |                  |
| Last Name/Organization Name                                                                                                                                                                                                       |             | Address                                           |                                                                                                                                               |                                                   | Date of Loan                                |                  |
| Johnson                                                                                                                                                                                                                           |             | 2928 Moss Spring Dr                               |                                                                                                                                               |                                                   | 3/1/2018                                    |                  |
| City                                                                                                                                                                                                                              | State       | Zip Code                                          | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election<br><input type="checkbox"/> Runoff (Local Elections Only) |                                                   |                                             |                  |
| Antioch                                                                                                                                                                                                                           | TN          | 37013                                             |                                                                                                                                               |                                                   |                                             |                  |
| 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)                                                                                                                                                                  |             |                                                   |                                                                                                                                               | Outstanding Loan Balance<br>(Beginning of Period) | Loans<br>Received                           | Loan<br>Payments |
| (Total loans received should also be shown on item 16 on summary page)<br>(Total loan payments should also be shown on item 20 on summary page)<br>(Total outstanding loan balance should also be shown on item 12 on front page) |             |                                                   |                                                                                                                                               | \$8,500.00                                        | \$4,000.00                                  | \$12,500.00      |





## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

|                                                                                                                                                                   |       |             |  |                                                               |                              |                         |                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------|--|---------------------------------------------------------------|------------------------------|-------------------------|----------------------------------------|
| NAME OF CANDIDATE OR COMMITTEE<br><br>Johnson for Register of Deeds                                                                                               |       |             |  | 2 REPORT COVERING THE PERIOD<br>FROM: 1/16/2018 TO: 3/31/2018 |                              |                         |                                        |
| 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<br>(Beginning of Period)                  | Debt occurred<br>This Period | Payments<br>This Period | Outstanding Balance<br>(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<br>(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b on summary page)                                              |       |             |  | \$0.00                                                        | \$0.00                       | \$0.00                  | \$0.00                                 |