

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 4/13/2018		2.a. NAME OF CANDIDATE OR COMMITTEE Jennifer M Mason													
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE 5/1/2018													
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 1006 St Hubbins Drive Spring Hill TN 37174 () -															
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone 1006 St Hubbins Drive Spring Hill TN 37174 () -															
5. OFFICE SOUGHT (include district number, if applicable) County Commissioner - Dist 03		6. NAME OF POLITICAL TREASURER (may be candidate) Felicia Ciaramitaro													
7. CATEGORY OR REPORT (Check one) ☒ FIRST QUARTER ☐ SECOND QUARTER ☐ THIRD QUARTER ☐ FOURTH QUARTER ☐ PRE-PRIMARY ☐ PRE-GENERAL ☐ MID-YEAR SUPPLEMENTAL ☐ YEAR-END SUPPLEMENTAL															
8.a. BEGINNING DATE OF REPORTING PERIOD 1/16/2018		8.b. ENDING DATE OF REPORTING PERIOD 3/31/2018													
9. (Check one) a. ☐ This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. ☒ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.															
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. signature of candidate 619-4276-B31B-43F 04/13/18 - 12:33:09 signature of political treasurer date															
11. WITNESS SIGNATURE signature of witness date signature of witness date															
12. SUMMARY <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. BALANCE ON HAND LAST REPORT</td> <td style="width: 20%; text-align: right;">\$0.00</td> </tr> <tr> <td>b. TOTAL RECEIPTS THIS PERIOD</td> <td style="text-align: right;">\$2,108.02</td> </tr> <tr> <td>c. TOTAL DISBURSEMENTS THIS PERIOD</td> <td style="text-align: right;">\$2,012.97</td> </tr> <tr> <td>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)</td> <td style="text-align: right;">\$95.05</td> </tr> <tr> <td>e. TOTAL LOANS OUTSTANDING</td> <td style="text-align: right;">\$1,958.02</td> </tr> <tr> <td>f. TOTAL OBLIGATIONS OUTSTANDING</td> <td style="text-align: right;">\$0.00</td> </tr> </table>				a. BALANCE ON HAND LAST REPORT	\$0.00	b. TOTAL RECEIPTS THIS PERIOD	\$2,108.02	c. TOTAL DISBURSEMENTS THIS PERIOD	\$2,012.97	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$95.05	e. TOTAL LOANS OUTSTANDING	\$1,958.02	f. TOTAL OBLIGATIONS OUTSTANDING	\$0.00
a. BALANCE ON HAND LAST REPORT	\$0.00														
b. TOTAL RECEIPTS THIS PERIOD	\$2,108.02														
c. TOTAL DISBURSEMENTS THIS PERIOD	\$2,012.97														
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$95.05														
e. TOTAL LOANS OUTSTANDING	\$1,958.02														
f. TOTAL OBLIGATIONS OUTSTANDING	\$0.00														



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Jennifer M Mason	14. REPORT COVERING THE PERIOD FROM: 1/16/2018 TO: 3/31/2018	
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

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

b. Itemized Contributions (over \$100 from each source this period) \$ 150.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 150.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 1,958.02

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0.00

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 2,108.02

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)

Campaign Marketing	\$	<u>233.97</u>
Campaign Finance	\$	<u>19.95</u>
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Total of Expenditures (\$100 or less each payee) \$ 253.92

b. Itemized Expenditures (Over \$100 each payee this period) \$ 1,759.05

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 2,012.97

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0.00

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 2,012.97

22. IN-KIND CONTRIBUTIONS

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

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

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

23. OBLIGATIONS

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

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

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



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jennifer M Mason				2. REPORT COVERING THE PERIOD FROM: 1/16/2018 TO: 3/31/2018		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name Kim		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name Helper				☒ Primary Election ☐ General Election		\$100.00
Address 308 Devonshire Drive				☐ Runoff (Local Elections Only)		
City Franklin		State TN	Zip Code 37064	Date of Contribution		Aggregate This Election
Occupation				02/26/18		\$100.00
Employer						
First Name Jennifer		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name Mason				☒ Primary Election ☐ General Election		\$50.00
Address 1006 St. Hubbins				☐ Runoff (Local Elections Only)		
City Spring Hill		State TN	Zip Code 37174	Date of Contribution		Aggregate This Election
Occupation				02/05/18		\$50.00
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				☐ Primary Election ☐ General Election		
Address				☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				☐ Primary Election ☐ General Election		
Address				☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					\$150.00	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jennifer M Mason			2. REPORT COVERING THE PERIOD FROM: 1/16/2018 TO: 3/31/2018		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name		Middle Name		Purpose of Expenditure Campaign Marketing - Signs and Banners	Amount of Expenditure \$1,122.38
Last Name/Business Name The Shop					
Address 33 East Main Street					
City Hohenwald		State TN	Zip Code 38462		
First Name		Middle Name		Purpose of Expenditure Campaign Marketing - Postcards, Magnetic Signs, Business Cards	Amount of Expenditure \$636.67
Last Name/Business Name Vista Print					
Address 275 Wyman Street					
City Waltham		State MA	Zip Code 02451		
First Name		Middle Name			
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name			
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name			
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name			
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name			
Last Name/Business Name					
Address					
City		State	Zip Code		
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					\$1,759.05



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE						2. REPORT COVERING THE PERIOD	
Jennifer M Mason						FROM: 1/16/2018	TO: 3/31/2018
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name Jennifer		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	
Last Name/Organization Name Mason				\$1,958.02		\$1,958.02	
Address 1006 St. Hubbins Dr				Loan Received For:		Date of Loan	
City Spring Hill		State TN		Zip Code 37174		☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
						2/5/2018	
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		City		State	
		Zip Code				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		City		State	
		Zip Code				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		City		State	
		Zip Code				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		City		State	
		Zip Code				Zip Code	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
4. Totals for all Loans (complete on last page of itemized loans)				Outstanding Loan Balance (Beginning of Period)		Loans Received	
(Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				\$1,958.02		\$1,958.02	
				\$0.00		\$1,958.02	

