

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. DATE OF REPORT <b>12/1/2020</b>		2.a. NAME OF CANDIDATE OR COMMITTEE <b>Missy Marshall</b>			
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE <b>2020-12-08</b>		
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route <b>641 Warwick Oaks Lane E</b>	City <b>Collierville</b>	State <b>TN</b>	Zip Code <b>38017</b>	Phone <b>(901) 552-6171</b>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)					
Street or Rural Route <b>641 Warwick Oaks Lane E</b>	City <b>Collierville</b>	State <b>TN</b>	Zip Code <b>38017</b>	Phone <b>(901) 552-6171</b>	
5. OFFICE SOUGHT (include district number, if applicable) <b>Collierville Alderman, Pos. 4</b>			6. NAME OF POLITICAL TREASURER (may be candidate) <b>Marianne Dunavant</b>		
7. CATEGORY OR REPORT (Check one)					
<input 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 checked="" type="checkbox"/> PRE-GENERAL
			<input type="checkbox"/> MID-YEAR SUPPLEMENTAL	<input type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD <b>2020-10-25</b>			8.b. ENDING DATE OF REPORTING PERIOD <b>2020-11-28</b>		
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.)					
b. <input checked="" 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.					
_____ signature of candidate		_____ date		_____ signature of political treasurer	
11. WITNESS SIGNATURE					
_____ signature of witness		_____ date		_____ signature of witness	
				_____ date	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT .....				\$	<u>1,181.12</u>
b. TOTAL RECEIPTS THIS PERIOD .....				\$	<u>6,700.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD .....				\$	<u>6,763.87</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....				\$	<u>1,117.25</u>
e. TOTAL LOANS OUTSTANDING .....				\$	<u>13,000.00</u>
f. TOTAL OBLIGATIONS OUTSTANDING .....				\$	<u>0.00</u>





# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Missy Marshall</b>				2. REPORT COVERING THE PERIOD FROM: 2020-10-26 TO: 2020-11-28		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					<b>Amount</b> <b>\$0.00</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name <b>Robyn</b>		Middle Name		Contribution Received For:		Amount of Contribution  <b>\$250.00</b>
Last Name/Organization Name <b>Tyler</b>				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address <b>244 Colbert Street</b>				<input checked="" type="checkbox"/> Runoff (Local Elections Only)		
City <b>Collierville</b>		State <b>TN</b>	Zip Code <b>38017</b>	Date of Contribution <b>2020-10-26</b>		Aggregate This Election  <b>\$250.00</b>
Occupation <b>Owner</b>				Employer <b>Germantown Day Spa</b>		
First Name <b>Duane</b>		Middle Name		Contribution Received For:		Amount of Contribution  <b>\$500.00</b>
Last Name/Organization Name <b>Marshall</b>				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address <b>520 Raleigh LaGrange</b>				<input checked="" type="checkbox"/> Runoff (Local Elections Only)		
City <b>Rossville</b>		State <b>TN</b>	Zip Code <b>38066</b>	Date of Contribution <b>2020-10-26</b>		Aggregate This Election  <b>\$500.00</b>
Occupation <b>Pilot</b>				Employer		
First Name <b>Michael</b>		Middle Name		Contribution Received For:		Amount of Contribution  <b>\$250.00</b>
Last Name/Organization Name <b>Green</b>				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address <b>349 College St</b>				<input checked="" type="checkbox"/> Runoff (Local Elections Only)		
City <b>Collierville</b>		State <b>TN</b>	Zip Code <b>38017</b>	Date of Contribution <b>2020-10-26</b>		Aggregate This Election  <b>\$250.00</b>
Occupation <b>Realtor</b>				Employer <b>John Green &amp; Co. Realtors</b>		
First Name		Middle Name		Contribution Received For:		Amount of Contribution  <b>\$1,000.00</b>
Last Name/Organization Name <b>Tennessee Realtors PAC</b>				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address <b>901 19th Ave South</b>				<input checked="" type="checkbox"/> Runoff (Local Elections Only)		
City <b>Nashville</b>		State <b>TN</b>	Zip Code <b>37212</b>	Date of Contribution <b>2020-10-26</b>		Aggregate This Election  <b>\$1,000.00</b>
Occupation <b>N/A</b>				Employer <b>N/A</b>		
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.)					<b>\$2,000.00</b>	



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Missy Marshall</b>			2. REPORT COVERING THE PERIOD FROM: 2020-10-28 TO: 2020-11-28		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$2,000.00</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	<b>\$500.00</b>
Address				<input checked="" type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	Aggregate This Election
Memphis		TN	38119	2020-11-02	<b>\$500.00</b>
Occupation					
Employer					
N/A					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	<b>\$250.00</b>
Address				<input checked="" type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	Aggregate This Election
Collierville		TN	38017	2020-11-02	<b>\$250.00</b>
Occupation					
Employer					
Realtor					
Real Living McLemore & Co					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	<b>\$500.00</b>
Address				<input checked="" type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	Aggregate This Election
Collierville		TN	38017	2020-11-06	<b>\$500.00</b>
Occupation					
Employer					
Realtor					
John Green & Co. Realtors					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	<b>\$500.00</b>
Address				<input checked="" type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	Aggregate This Election
Nashville		TN	37203	2020-11-06	<b>\$500.00</b>
Occupation					
Employer					
N/A					
N/A					
5. TOTAL ITEMIZED CONTRIBUTIONS				<b>\$3,750.00</b>	
<small>(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.)</small>					



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Missy Marshall</b>			2. REPORT COVERING THE PERIOD			
			FROM: 2020-10-28	TO: 2020-11-28		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>\$3,750.00</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name <b>Taylor</b>		Middle Name		Contribution Received For:		
Last Name/Organization Name <b>Stamps</b>				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input checked="" type="checkbox"/> Runoff (Local Elections Only)		
Address <b>264 Briarbrook Cove</b>				Date of Contribution  <b>2020-11-13</b>		
City <b>Collierville</b>	State <b>TN</b>	Zip Code <b>38017</b>	Amount of Contribution  <b>\$500.00</b>			
Occupation <b>Retired</b>						
Employer <b>Retired</b>						
First Name		Middle Name		Contribution Received For:		
Last Name/Organization Name <b>Friends of Curry Todd</b>				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input checked="" type="checkbox"/> Runoff (Local Elections Only)		
Address <b>1661 Aaron Brenner Dr Ste 300</b>				Date of Contribution  <b>2020-11-17</b>		
City <b>Memphis</b>	State <b>TN</b>	Zip Code <b>38120</b>	Amount of Contribution  <b>\$250.00</b>			
Occupation <b>N/A</b>						
Employer <b>N/A</b>						
First Name		Middle Name		Contribution Received For:		
Last Name/Organization Name <b>Friends to Elect Ron Gant</b>				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input checked="" type="checkbox"/> Runoff (Local Elections Only)		
Address <b>1661 Aaron Brenner Dr Ste 300</b>				Date of Contribution  <b>2020-11-24</b>		
City <b>Memphis</b>	State <b>TN</b>	Zip Code <b>38120</b>	Amount of Contribution  <b>\$1,000.00</b>			
Occupation <b>N/A</b>						
Employer <b>N/A</b>						
First Name		Middle Name		Contribution Received For:		
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of Contribution		
City	State	Zip Code	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.)					<b>\$5,500.00</b>	



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Missy Marshall</b>			2. REPORT COVERING THE PERIOD FROM: 2020-10-2 TO: 2020-11-28	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$0.00</b>
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 <b>Direct Edge Campaigns LLC</b>		<b>Mailers</b>		<b>\$5,388.99</b>
Address <b>2000 Glen Echo Rd Ste 207A</b>				
City <b>Nashville</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>Joslin and Son Signs Company</b>		<b>Signs</b>		<b>\$1,037.88</b>
Address <b>630 Murfreesboro Pike</b>				
City <b>Nashville</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>Watkins Uiberall, PLLC</b>		<b>Accounting</b>		<b>\$300.00</b>
Address <b>1661 Aaron Brenner Dr Ste 300</b>				
City <b>Memphis</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)				<b>\$6,726.87</b>



# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD				
Missy Marshall				FROM:		TO:		
				2020-10-25		2020-11-28		
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		Middle Name		Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
Missy				\$12,500.00	\$500.00	\$0.00	\$13,000.00	
Last Name/Organization Name				\$12,500.00	\$500.00	\$0.00	\$13,000.00	
Marshall								
Address				Loan Received For:		Date of Loan		
641 Warwick Oaks Lane E				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		2020-10-30		
City		State	Zip Code		<input checked="" type="checkbox"/> Runoff (Local Elections Only)			
Collierville		TN	38017					
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 (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
(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.)				\$12,500.00	\$500.00	\$0.00	\$13,000.00	

