CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

1. Date: 10/19/2024 2.a. Candidate or Committee Name: Jody Barnwell Smith

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/1/2024

4. Campaign Address: 608 Hampden Court

City: Franklin State: TN Zip Code: 37069 Phone: _____

5. Candidate Home Address: 608 Hampden Court

City: Franklin State: TN Zip Code: 37069 Phone: 9312656353

Candidate Email Address: jody.barnwell@gmail.com

6. Office Sought: (include district number, if applicable) State Ex Committeewoman- Dem

7. Name of Political Treasurer (may be candidate): Ashley Webster

Political Treasurer Email Address: ashley.webster@gmail.com

8. Category or Report: (check one)

☐ First Quarter ☑ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election

9. Reporting Period: Start Date: 4/1/2024 End Date: 6/30/2024

10. Detailed Disclosure: (Check one)

☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total $1,000 or less AND expenditures total $1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)

☑ 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.

11. 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.

-117B-4588-BDF8-2E8
10/19/24 - 7:47 PM

Candidate Signature	Date	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

12. Summary:

a.	Balance On Hand Last Report	$ $0.00
b.	Total Receipts This Period	$ $3,424.00
c.	Total Disbursements This Period	$ $1,158.53
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $2,265.47
e.	Total Loans Outstanding	$ $500.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jody Barnwell Smith

14. Reporting Period: Start Date: 4/1/2024 End Date: 6/30/2024

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ $1,974.00
(Note: Effective January 16, 2023, Unitemized Contributions are capped at $2,000. See *Instructions* for more information.)

b. Itemized Contributions (over $100 from each source this period) ..... $ $950.00

c. Loans Received This Reporting Period..... $ $500.00

d. Interest Received This Reporting Period ..... $

e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... $ $3,424.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $1,158.53
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $

c. Total Obligation Payments Made This Period..... $

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... $ $1,158.53

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $

b. Itemized In-Kind Contributions Received This Period ..... $

c. Total In-Kind Contributions Received This Period ..... $

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jody Barnwell Smith

2. Reporting Period: Start Date: 4/1/2024 End Date: 6/30/2024

3. Total campaign contributions from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: R Last Name: Barnwell

Address: 4001 Anderson Rd A113 City: Nashville State: TN Zip Code: 37217

Occupation: Pit Master Employer: Edley's BBQ

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $ $250.00 Date of Contribution: 4/14/2024 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Damon Middle Name: _____ Last Name: Rogers

Address: 431 Boyd Mill Ave City: Franklin State: TN Zip Code: 37064

Occupation: Retired Employer: NA

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $ $100.00 Date of Contribution: 4/20/2024 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Claire Middle Name: _____ Last Name: Jones

Address: 2204 Belmont Blvd City: NAshville State: TN Zip Code: 37212

Occupation: NA Employer: NA

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $ $250.00 Date of Contribution: 5/10/2024 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Barnwell

Address: 4001 Anderson Rd A113 City: Nashville State: TN Zip Code: 37217

Occupation: Pit Master Employer: Edley's BBQ

Contribution Received For: Primary Election ■General Election Runoff (Local Elections Only)

Amount of Contribution: $ $250.00 Date of Contribution: 6/14/2024 Aggregate This Election: $ $500.00

Total Contributions: $ $850.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jody Barnwell Smith

2. Reporting Period: Start Date: 4/1/2024 End Date: 6/30/2024

3. Total campaign contributions from preceding page (enter $0 if first page) $ $850.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: ______ **OR**

First Name: Damon Middle Name: ______ Last Name: Rogers

Address: 432 Boyd Mill Avenue City: Franklin State: TN Zip Code: 37064

Occupation: Retired Employer: NA

Contribution Received For: Primary Election ■ General Election Runoff (Local Elections Only)

Amount of Contribution: $ $100.00 Date of Contribution: 6/21/2024 Aggregate This Election: $ $200.00

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: $______ Date of Contribution: ______ Aggregate This Election: $ ______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: $______ Date of Contribution: ______ Aggregate This Election: $ ______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: $______ Date of Contribution: ______ Aggregate This Election: $ ______

Total Contributions: $ $950.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jody Barnwell Smith

2. Reporting Period: Start Date: 4/1/2024 End Date: 6/30/2024

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Deluxe Business Systems **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 801 South Marquette Avenue City: Minneapolis State: TN Zip Code: 55402

Purpose of Expenditure: Checks

Amount of Expenditure: $ $38.37 Date of Expenditure: $ 4/22/2024

Business or Organization Name: United States Postal Service **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 810 Oak Meadow Drive City: Franklin State: TN Zip Code: 20007

Purpose of Expenditure: Postage

Amount of Expenditure: $ $212.00 Date of Expenditure: $ 5/17/2024

Business or Organization Name: Campaign Verify **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1215 31st St NW City: Washington State: TN Zip Code: 20007

Purpose of Expenditure: Verification service for text banking

Amount of Expenditure: $ $95.00 Date of Expenditure: $ 5/28/2024

Business or Organization Name: Fortify Communications **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 926 Woodlands St City: Nashville State: TN Zip Code: 37206

Purpose of Expenditure: Logo design

Amount of Expenditure: $ $500.00 Date of Expenditure: $ 5/16/2024

Business or Organization Name: Printing Etc **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1411 Dickerson Pike City: Goodlettsville State: TN Zip Code: 37072

Purpose of Expenditure: Printing services, postcards

Amount of Expenditure: $ $194.78 Date of Expenditure: $ 6/14/2024

Total Expenditures: $ $1,040.15

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jody Barnwell Smith

2. Reporting Period: Start Date: 4/1/2024 End Date: 6/30/2024

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $1,040.15

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Act Blue, LLC **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: P.O. Box 441146 City: Somerville State: MA Zip Code: 02144
Purpose of Expenditure: Fee for donation interface (expenditure date for total amount for quarter)
Amount of Expenditure: $ $43.93 Date of Expenditure: $ 6/30/2024

Business or Organization Name: Stripe Payments Company **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: 354 Oyster Point Boulevard City: South San Franciscc State: CA Zip Code: 94080
Purpose of Expenditure: transaction fees for donations (all fees totaled for quarter)
Amount of Expenditure: $ $74.45 Date of Expenditure: $ 6/30/2024

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Total Expenditures: $ $1,158.53
(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Jody Barnwell Smith

2. Reporting Period: Start Date: 4/1/2024 End Date: 6/30/2024

3. Complete the appropriate items for each loan totaling more than one hundred dollars ($100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: ____________ **OR**

First Name: Jody Middle Name: ____________ Last Name: Smith

Address: 608 Hampden Court City: Franklin State: TN Zip Code: 37069

Outstanding Loan Balance (Beginning) .... $ $0.00

Loans Received .... $ $500.00

Loan Payments .... $ $0.00

Outstanding Loan (End) .... $ $500.00

Loan Received For: Primary Election ■General Election Runoff (Local Elections Only)

Date of Loan: 4/17/2024

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: ____________ **OR**

First Name: ____________ Middle Name: ____________ Last Name: ____________

Address: ____________ City: ____________ State: ____ Zip Code: ____________

Amount Guaranteed Outstanding: $____________

Business or Organization Name: ____________ **OR**

First Name: ____________ Middle Name: ____________ Last Name: ____________

Address: ____________ City: ____________ State: ____ Zip Code: ____________

Amount Guaranteed Outstanding: $____________

Business or Organization Name: ____________ **OR**

First Name: ____________ Middle Name: ____________ Last Name: ____________

Address: ____________ City: ____________ State: ____ Zip Code: ____________

Amount Guaranteed Outstanding: $____________

Business or Organization Name: ____________ **OR**

First Name: ____________ Middle Name: ____________ Last Name: ____________

Address: ____________ City: ____________ State: ____ Zip Code: ____________

Amount Guaranteed Outstanding: $____________

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) .... $ $0.00

Loans Received .... $ $500.00

Loan Payments .... $ $0.00

Outstanding Loan (End) .... $ $500.00