CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF CANDIDATE OR COMMITTEE
1-22-21	Aaron T. Murphy
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE
	11-3-20

4.a. CAMPAIGN ADDRESS AND PHONE

Street or Rural Route	City	State	Zip Code	Phone
308 Shawnee Dr.	Johnson City	TN	37604	915-6178

4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)

Street or Rural Route	City	State	Zip Code	Phone

5. OFFICE SOUGHT (include district number, if applicable)	6. NAME OF POLITICAL TREASURER (may be candidate)
Board of Commissioners	Troy R. Hensley

7. CATEGORY OF 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	8.b. ENDING DATE OF REPORTING PERIOD
10-25-20	1-15-21

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.

A. Murphy — signature of candidate; 1/25/2021 — date; Troy R. Hensley — signature of political treasurer; 1-22-21 — date

11. WITNESS SIGNATURE

Bethany N. Potter — signature of witness; 1/22/21 — date; Bride Wallace — signature of witness; 1/22/2021 — date

12. SUMMARY

a.	BALANCE ON HAND LAST REPORT	$ 2675.28
b.	TOTAL RECEIPTS THIS PERIOD	$ 1850.00
c.	TOTAL DISBURSEMENTS THIS PERIOD	$ 2749.41
d.	BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	$ 1776.37
e.	TOTAL LOANS OUTSTANDING	$
f.	TOTAL OBLIGATIONS OUTSTANDING	$

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SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD FROM:	TO:

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 300.00

b. Itemized Contributions (over $100 from each source this period) ..... $ 1550.00

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

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.) ..... $ 1850.00

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures ($100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

Advertising	$ 265.96
postage	$ 103.00
printing	$ 377.19
	$
	$
	$
	$
	$
	$

Total of Expenditures ($100 or less each payee) ..... $ 746.15

b. Itemized Expenditures (Over $100 each payee this period) ..... $ 2003.26

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) 2749.41

20. LOAN REPAYMENTS MADE THIS PERIOD ..... $ _____

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in Item 12.c.) 2749.41

22. IN-KIND CONTRIBUTIONS

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

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

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

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 i item 12.f.) ..... $ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: Aaron T. Murphy

2. REPORT COVERING THE PERIOD FROM: 10-25 TO: 1-15

3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter $0 if first itemized page): Amount 0

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than $100 from any contributor)

First Name	Middle Name	Last Name/Organization Name	Address	City	State	Zip Code	Occupation	Employer	Contribution Received For	Date of Contribution	Amount of Contribution	Aggregate This Election
Tom		Seaton	510 Lake Point Dr.	Piney Flats	TN	37686		Firehouse BBQ	☐ Primary ☑ General ☐ Runoff	10-29-20	500.00	
		Haven of Mercy	PO Box 5490	Johnson City	TN	37602			☐ Primary ☑ General ☐ Runoff	10-15-20	350.00	
Phillip		McCain	1813 Hillsboro Ave	Johnson City	TN	37604			☐ Primary ☑ General ☐ Runoff	10-21-20	150.00	
Walter		Harbon	111 Ridgemont Rd	Johnson City	TN	37601		Retired	☐ Primary ☑ General ☐ Runoff	10-11-20	300.00	

5. TOTAL ITEMIZED CONTRIBUTIONS: 1300.00
(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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: Aaron T. Murphy	2. REPORT COVERING THE PERIOD FROM: 10-25 TO: 10-25
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter $0 if first itemized page)	Amount: 1300

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than $100 from any contributor)

Contributor	Contribution Received For	Amount of Contribution
First Name: Robert Middle Name: Last Name/Organization Name: Cooper Address: 1008 Lawton Harris Rd City: Johnson City State: TN Zip Code: 37601 Occupation: Employer: Retired	☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only) Date of Contribution: 10-25	250.00 Aggregate This Election:
First Name: Middle Name: Last Name/Organization Name: Address: City: State: Zip Code: Occupation: Employer:	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only) Date of Contribution:	Aggregate This Election:
First Name: Middle Name: Last Name/Organization Name: Address: City: State: Zip Code: Occupation: Employer:	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only) Date of Contribution:	Aggregate This Election:
First Name: Middle Name: Last Name/Organization Name: Address: City: State: Zip Code: Occupation: Employer:	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only) Date of Contribution:	Aggregate This Election:

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.)	1550.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD FROM:	TO:
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	Middle Name		In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name				
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: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name				
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: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name				
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: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name				
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: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name				
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
(Carry forward to item 3. of next page if additional pages of this form are used.)
(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD FROM:	TO:
Aaron T. Murphy	10-25	1-15-21

3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter $0 if first itemized page) — Amount: 0

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than $100 to any payee during the period)

First Name	Middle Name	Last Name/Business Name	Address	City	State	Zip Code	Purpose of Expenditure	Amount of Expenditure
		Six Rivers Media					Advertising	744.00
		Gooden Labs					Advertising	502.59
TAleah		Rogers	1510 E. Fairview Ave	Johnson City	TN	37601	Advertising	201.63
Ken		Tyree	14678 Kew Valley Church Rd	Leesburg	VA	20176	Advertising	450.00
Will		Zoomy	1008 Dolphin Cir Apt 51	Johnson City	TN	37615	Advertising	100.00

5. TOTAL ITEMIZED EXPENDITURES — 2,003.26

(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.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD FROM: TO:

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)
Last Name/Organization Name					
Address		Loan Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		Date of Loan	
City	State / Zip Code				

List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)

First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address		Address	
City	State / Zip Code	City	State / Zip Code
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	

First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address		Address	
City	State / Zip Code	City	State / Zip Code
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	

First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address		Address	
City	State / Zip Code	City	State / Zip Code
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	

First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address		Address	
City	State / Zip Code	City	State / Zip Code
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	

4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.a. on front page.)	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

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