


# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. DATE OF REPORT 10/13/2020		2.a. NAME OF CANDIDATE OR COMMITTEE Missy Marshall			
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE 2020-11-03		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 641 Warwick Oaks Lane E		City Collierville	State TN	Zip Code 38017	Phone (901) 552-6171
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route 641 Warwick Oaks Lane E		City Collierville	State TN	Zip Code 38017	Phone (901) 552-6171
5. OFFICE SOUGHT (include district number, if applicable) Collierville Alderman, Pos. 4			6. NAME OF POLITICAL TREASURER (may be candidate) Marianne Dunavant		
7. CATEGORY OR REPORT (Check one)					
<input type="checkbox"/> FIRST QUARTER		<input type="checkbox"/> SECOND QUARTER		<input checked="" 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 2020-08-24			8.b. ENDING DATE OF REPORTING PERIOD 2020-09-30		
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		_____ signature of political treasurer		_____ date	
					
11. WITNESS SIGNATURE					
_____ signature of witness		_____ date		_____ signature of witness	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT .....		\$ 0.00			
b. TOTAL RECEIPTS THIS PERIOD .....		\$ 11,000.00			
c. TOTAL DISBURSEMENTS THIS PERIOD .....		\$ 7,667.68			
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		\$ 3,332.32			
e. TOTAL LOANS OUTSTANDING .....		\$ 7,000.00			
f. TOTAL OBLIGATIONS OUTSTANDING .....		\$ 0.00			





# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Missy Marshall</b>			2. REPORT COVERING THE PERIOD FROM: 2020-08-24 TO: 2020-09-30			
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>Barry</b>		Middle Name		Contribution Received For:		Amount of Contribution  <b>\$1,000.00</b>
Last Name/Organization Name <b>Marshall</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <b>641 Warwick Oaks Lane E</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Collierville</b>		State <b>TN</b>	Zip Code <b>38017</b>	Date of Contribution <b>2020-09-08</b>		Aggregate This Election  <b>\$1,000.00</b>
Occupation <b>Pilot</b>						
Employer <b>American Airlines</b>						
First Name <b>Mark</b>		Middle Name <b>H</b>		Contribution Received For:		Amount of Contribution  <b>\$300.00</b>
Last Name/Organization Name <b>Heuberger</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <b>235 Amelia Cove</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Collierville</b>		State <b>TN</b>	Zip Code <b>38017</b>	Date of Contribution <b>2020-09-10</b>		Aggregate This Election  <b>\$300.00</b>
Occupation <b>President/CEO</b>						
Employer <b>Collierville Chamber of Commerce</b>						
First Name <b>Jim</b>		Middle Name		Contribution Received For:		Amount of Contribution  <b>\$500.00</b>
Last Name/Organization Name <b>Henry</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <b>PO Box 843</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Kingston</b>		State <b>TN</b>	Zip Code <b>37763</b>	Date of Contribution <b>2020-09-23</b>		Aggregate This Election  <b>\$500.00</b>
Occupation <b>Retired</b>						
Employer <b>Retired</b>						
First Name <b>Karen</b>		Middle Name		Contribution Received For:		Amount of Contribution  <b>\$250.00</b>
Last Name/Organization Name <b>Conlan</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <b>1226 Yorktown Rd</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Collierville</b>		State <b>TN</b>	Zip Code <b>38017</b>	Date of Contribution <b>2020-09-16</b>		Aggregate This Election  <b>\$250.00</b>
Occupation <b>Interior Decorator</b>						
Employer <b>K-topia Home</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>\$2,050.00</b>	



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Missy Marshall</b>				2. REPORT COVERING THE PERIOD FROM: 2020-08-24 TO: 2020-09-30		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>\$2,050.00</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name <b>David</b>		Middle Name <b>Phillip</b>		Contribution Received For:		Amount of Contribution  <b>\$750.00</b>
Last Name/Organization Name <b>Halle</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <b>581 Bray Station Rd</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Collierville</b>		State <b>TN</b>	Zip Code <b>38017</b>	Date of Contribution <b>2020-09-17</b>		Aggregate This Election  <b>\$750.00</b>
Occupation <b>Real Estate</b>						
Employer <b>Self Employed</b>						
First Name		Middle Name		Contribution Received For:		Amount of Contribution  <b>\$250.00</b>
Last Name/Organization Name <b>Andrew Investments</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <b>7148 Donnington Dr</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Germantown</b>		State <b>TN</b>	Zip Code <b>38138</b>	Date of Contribution <b>2020-09-23</b>		Aggregate This Election  <b>\$250.00</b>
Occupation <b>NA</b>						
Employer <b>NA</b>						
First Name <b>James</b>		Middle Name <b>G.</b>		Contribution Received For:		Amount of Contribution  <b>\$250.00</b>
Last Name/Organization Name <b>Robbins</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <b>6484 Robbins Ridge Lane</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Memphis</b>		State <b>TN</b>	Zip Code <b>38119</b>	Date of Contribution <b>2020-09-23</b>		Aggregate This Election  <b>\$250.00</b>
Occupation <b>Retired</b>						
Employer <b>Retired</b>						
First Name <b>Ryan</b>		Middle Name		Contribution Received For:		Amount of Contribution  <b>\$200.00</b>
Last Name/Organization Name <b>Swindoll</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <b>3814 Abbott Martin Rd</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Nashville</b>		State <b>TN</b>	Zip Code <b>37215</b>	Date of Contribution <b>2020-09-28</b>		Aggregate This Election  <b>\$200.00</b>
Occupation <b>Self Employed</b>						
Employer <b>Self Employed</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>\$3,500.00</b>	



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Missy Marshall</b>			2. REPORT COVERING THE PERIOD FROM: 2020-08-24 TO: 2020-09-30		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$3,500.00</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>Barbara</b>		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution  <b>\$250.00</b>
Last Name/Organization Name <b>Hildebrandt</b>					
Address <b>8941 Fern Valley Cove</b>					
City <b>Cordova</b>		State <b>TN</b>	Zip Code <b>38018</b>	Date of Contribution <b>2020-09-30</b>	Aggregate This Election  <b>\$250.00</b>
Occupation <b>Administrative Assistant</b>					
Employer <b>Halle Investment Company</b>					
First Name		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address					
City		State	Zip Code	Date of Contribution	Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address					
City		State	Zip Code	Date of Contribution	Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address					
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.)					<b>\$3,750.00</b>



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Missy Marshall</b>		2. REPORT COVERING THE PERIOD FROM: 2020-08-2 TO: 2020-09-30		
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>Printing</b>	<b>\$7,651.38</b>	
Address <b>2000 Glen Echo Road, Ste 207A</b>				
City <b>Nashville</b>	State <b>TN</b>			Zip Code <b>37215</b>
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.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			<b>\$7,651.38</b>	



# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD				
Missy Marshall				FROM:		TO:		
				2020-08-24		2020-09-30		
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				\$0.00	\$7,000.00	\$0.00	\$7,000.00	
Last Name/Organization Name				\$0.00	\$7,000.00	\$0.00	\$7,000.00	
Marshall								
Address				Loan Received For:		Date of Loan		
641 Warwick Oaks Lane E				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		2020-09-23		
City		State	Zip Code					
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				
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				
<b>4. Totals for all Loans (complete on last page of itemized loans)</b>				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.)				\$0.00	\$7,000.00	\$0.00	\$7,000.00	

