



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 2/26/2024 2.a. Candidate or Committee Name: Phillip Marshall
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 3/5/2024
4. Campaign Address: 1604 Crescent Drive
City: Kingsport State: TN Zip Code: 37664 Phone: _____
5. Candidate Home Address: 1604 Crescent Drive
City: Kingsport State: TN Zip Code: 37664 Phone: _____
Candidate Email Address: phillipmarshalldds@me.com
6. Office Sought: (include district number, if applicable) KINGSPORT SCHOOL BOARD
7. Name of Political Treasurer (may be candidate): Bob Harshbarger
Political Treasurer Email Address: pestlemortar@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: 1/16/2024 End Date: 2/24/2024
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.

Candidate Signature

Date

38A2-4DCD-A7D9-8D9E
02/26/24 - 6:12 PM

Political Treasurer Signature

Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

- | | |
|---|----------------------|
| a. Balance On Hand Last Report | \$ <u>\$0.00</u> |
| b. Total Receipts This Period | \$ <u>\$2,025.00</u> |
| c. Total Disbursements This Period | \$ <u>\$0.00</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$2,025.00</u> |
| e. Total Loans Outstanding | \$ <u>\$1,000.00</u> |
| f. Total Obligations Outstanding | \$ <u>\$0.00</u> |

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Phillip Marshall

14. Reporting Period: Start Date: 1/16/2024 End Date: 2/24/2024

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$375.00
(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) \$ \$650.00
- c. Loans Received This Reporting Period..... \$ \$1,000.00
- 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.) \$ \$2,025.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ _____
(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.)..... \$ _____

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: Phillip Marshall
2. Reporting Period: Start Date: 1/16/2024 End Date: 2/24/2024
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: Preston Middle Name: _____ Last Name: Marshall

Address: 1215 Plantation Blvd City: Gallatin State: TN Zip Code: 37066

Occupation: Controller Employer: Nashville Wire Products

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 2/9/2024 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Harry Middle Name: _____ Last Name: Turner

Address: 3425 Parkcliffe City: Kingsport State: TN Zip Code: 37664

Occupation: Retired Employer: NA

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

Amount of Contribution: \$ \$150.00 Date of Contribution: 2/23/2024 Aggregate This Election: \$ \$150.00

Business or Organization Name: David Pond DDS, MDS, PC **OR**

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

Address: 210 Lockport Circle City: Kingsport State: TN Zip Code: 37664

Occupation: Periodontist Employer: David Pond DDS, MDS, PC

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

Amount of Contribution: \$ \$300.00 Date of Contribution: 2/23/2024 Aggregate This Election: \$ \$300.00

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: \$ _____

Total Contributions: \$ \$650.00

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Phillip Marshall
2. Reporting Period: Start Date: 1/16/2024 End Date: 2/24/2024
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: Phillip Middle Name: _____ Last Name: Marshall

Address: 1604 Crescent Drive City: Kingsport State: TN Zip Code: 37664

Outstanding Loan Balance (Beginning) \$ \$0.00

Loans Received \$ \$1,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$1,000.00

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

Date of Loan: 2/2/2024

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 \$ \$1,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$1,000.00