



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 1/31/2024 2.a. Candidate or Committee Name: Howard Gentry
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 4109 Kings Lane
City: Nashville State: TN Zip Code: 37218 Phone: (615) 222-1111
5. Candidate Home Address: 4109 Kings Lane
City: Nashville State: TN Zip Code: 37218 Phone: (615) 222-1111
Candidate Email Address: stephen@thomaslindseygroup.com
6. Office Sought: (include district number, if applicable) Criminal Court Clerk
7. Name of Political Treasurer (may be candidate): Jack Cawthon
Political Treasurer Email Address: jack.cawthon@me.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: 7/1/2023 End Date: 1/15/2024
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	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

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01/31/24 - 3:28 PM

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$66,169.53</u>
b. Total Receipts This Period	\$ <u>\$0.00</u>
c. Total Disbursements This Period	\$ <u>\$7,938.21</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$58,231.32</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Howard Gentry

14. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(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) \$ _____
- c. Loans Received This Reporting Period..... \$ _____
- 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.) \$ _____

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$7,938.21
(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.)..... \$ \$7,938.21

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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Howard Gentry
2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
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: Friends of Arnold Hayes **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 218857 City: Nashville State: TN Zip Code: 37221
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$103.45 Date of Expenditure: \$ 7/23/2023

Business or Organization Name: Justin Jones for State House **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 2261 City: Antioch State: TN Zip Code: 37011
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 7/3/2023

Business or Organization Name: T-Mobile **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 12920 SE 38th Street City: Bellevue State: WA Zip Code: 98006
Purpose of Expenditure: Cell Service
Amount of Expenditure: \$ \$275.96 Date of Expenditure: \$ 7/3/2023

Business or Organization Name: Vivian Wilhoite for Mayor **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 22016 City: Nashville State: TN Zip Code: 37202
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 7/3/2023

Business or Organization Name: DCDW **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 330154 City: Nashville State: TN Zip Code: 37203
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 7/10/2023

Total Expenditures: \$ \$729.41

(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: Howard Gentry
2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$729.41

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: Taylor Genter for TNDP EVP **OR**

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

Address: 110 Interstate Dr City: Nashville State: TN Zip Code: 37206

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 7/12/2023

Business or Organization Name: Brenda Gadd for Metro Council **OR**

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

Address: 3515 Richland Ave City: Nashville State: TN Zip Code: 37205

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 7/13/2023

Business or Organization Name: Jim Schulman for Vice Mayor **OR**

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

Address: PO Box 961 City: Madison State: TN Zip Code: 37116

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 7/13/2023

Business or Organization Name: Olivia Hill for Metro Council **OR**

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

Address: 7916 River Fork Drive City: Nashville State: TN Zip Code: 37221

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 7/13/2023

Business or Organization Name: Sharon for Nashville **OR**

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

Address: 202 South 11th Street City: Nashville State: TN Zip Code: 37206

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 7/13/2023

Total Expenditures: \$ \$1,529.41

(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: Howard Gentry
2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,529.41

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: T-Mobile **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 12920 SE 38th Street City: Bellevue State: WA Zip Code: 98006
Purpose of Expenditure: Cell Service
Amount of Expenditure: \$ \$267.71 Date of Expenditure: \$ 8/1/2023

Business or Organization Name: Nashville City Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 200 2nd Ave South City: Nashville State: TN Zip Code: 37201
Purpose of Expenditure: Dues
Amount of Expenditure: \$ \$756.00 Date of Expenditure: \$ 8/11/2023

Business or Organization Name: Pink Christmas **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3421 Belmont Blvd City: Nashville State: TN Zip Code: 37215
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 8/16/2023

Business or Organization Name: Hispanic Family Foundation **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3955 Nolensville Pike City: Nashville State: TN Zip Code: 37211
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$135.23 Date of Expenditure: \$ 8/24/2023

Business or Organization Name: T-Mobile **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 12920 SE 38th Street City: Bellevue State: WA Zip Code: 98006
Purpose of Expenditure: Cell Service
Amount of Expenditure: \$ \$268.91 Date of Expenditure: \$ 9/1/2023

Total Expenditures: \$ \$3,057.26

(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: Howard Gentry
2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,057.26

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: TSU Foundation **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3500 John A Merritt Blvd City: Nashville State: TN Zip Code: 37209
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$175.00 Date of Expenditure: \$ 9/20/2023

Business or Organization Name: TSU Foundation **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3500 John A Merritt Blvd City: Nashville State: TN Zip Code: 37209
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 9/22/2023

Business or Organization Name: T-Mobile **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 12920 SE 38th Street City: Bellevue State: WA Zip Code: 98006
Purpose of Expenditure: Cell Service
Amount of Expenditure: \$ \$258.53 Date of Expenditure: \$ 10/2/2023

Business or Organization Name: Heart & Lung Association **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 601 Corporate Centre Dr City: Franklin State: TN Zip Code: 37076
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: TSU Foundation **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3500 John A Merritt Blvd City: Nashville State: TN Zip Code: 37209
Purpose of Expenditure: Homecoming Gala
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 10/6/2023

Total Expenditures: \$ \$4,290.79

(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: Howard Gentry
2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$4,290.79

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: Joslin Signs **OR**

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

Address: 630 Murfreesboro Pike City: Nashville State: TN Zip Code: 37210

Purpose of Expenditure: Signs

Amount of Expenditure: \$ \$327.50 Date of Expenditure: \$ 10/13/2023

Business or Organization Name: T-Mobile **OR**

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

Address: 12920 SE 38th Street City: Bellevue State: WA Zip Code: 98006

Purpose of Expenditure: Cell Service

Amount of Expenditure: \$ \$258.53 Date of Expenditure: \$ 10/31/2023

Business or Organization Name: Operation Andrew **OR**

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

Address: 1807 Grand Ave City: Nashville State: TN Zip Code: 37212

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 11/3/2023

Business or Organization Name: Charlane Oliver for Senate **OR**

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

Address: PO Box 330602 City: Nashville State: TN Zip Code: 37203

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 11/10/2023

Business or Organization Name: Chick-Fil-A **OR**

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

Address: 1622 Church St City: Nashville State: TN Zip Code: 37203

Purpose of Expenditure: Food & Beverage

Amount of Expenditure: \$ \$266.07 Date of Expenditure: \$ 11/24/2023

Total Expenditures: \$ \$6,142.89

(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: Howard Gentry
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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: T-Mobile **OR**

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

Address: 12920 SE 38th Street City: Bellevue State: WA Zip Code: 98006

Purpose of Expenditure: Cell Service

Amount of Expenditure: \$ \$258.53 Date of Expenditure: \$ 11/30/2023

Business or Organization Name: NAACP Nashville **OR**

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

Address: PO Box 280992 City: Nashville State: TN Zip Code: 37228

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$650.00 Date of Expenditure: \$ 12/7/2023

Business or Organization Name: Metro Retirees Association **OR**

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

Address: 733 Battle Rd City: Nolensville State: TN Zip Code: 37135

Purpose of Expenditure: Luncheon

Amount of Expenditure: \$ \$94.48 Date of Expenditure: \$ 12/14/2023

Business or Organization Name: M&M Catering **OR**

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

Address: 27 Tusculum Rd City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Office Holiday Lunch

Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 12/28/2023

Business or Organization Name: T-Mobile **OR**

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

Address: 12920 SE 38th Street City: Bellevue State: WA Zip Code: 98006

Purpose of Expenditure: Cell Service

Amount of Expenditure: \$ \$192.31 Date of Expenditure: \$ 1/2/2024

Total Expenditures: \$ \$7,688.21

(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: Howard Gentry
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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: Ebenezer Community Church **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2624 Morena St City: Nashville State: TN Zip Code: 37208
Purpose of Expenditure: Christmas for Kids
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 11/27/2023

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: \$ _____

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: \$ \$7,938.21

(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.)