CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF CANDIDATE OR COMMITTEE
7-10-2018	Allen McADOO

2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE

4.a. CAMPAIGN ADDRESS AND PHONE

Street or Rural Route	City	State	Zip Code	Phone
1307 Toddington Dr.	Murfreesboro	TN	37130	615 293-3584

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)
18th District County Commissioner	Allen McADOO

7. CATEGORY OR 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

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.

Allen McAdoo — signature of candidate; 7-10-2018 — date; Allen McAdoo — signature of political treasurer; 7-10-2018 — date

11. WITNESS SIGNATURE

[signature] — signature of witness; 7-10-18 — date; [signature] — signature of witness; 7-10-18 — date

12. SUMMARY

a.	BALANCE ON HAND LAST REPORT	$ 50
b.	TOTAL RECEIPTS THIS PERIOD	$ 1,600.00
c.	TOTAL DISBURSEMENTS THIS PERIOD	$ 3774.00
d.	BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	$ 1,650.00
e.	TOTAL LOANS OUTSTANDING	$ 50.00
f.	TOTAL OBLIGATIONS OUTSTANDING	$ 0

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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) ..... $ 100.00

b. Itemized Contributions (over $100 from each source this period) ..... $ 1,600.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... $ 1,700.00

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.) ..... $ 1,700.00

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)

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

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

b. Itemized Expenditures (Over $100 each payee this period) ..... $ 3,774.00

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... $ 3,774.00

20. LOAN REPAYMENTS MADE THIS PERIOD ..... $ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) ..... $ 3,774.00

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions ($100 or less from each source this period) ..... $ 300.00

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.) ..... $ 300.00

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

2. REPORT COVERING THE PERIOD FROM: 4-1-2018 TO: 6-30-2018

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

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
David		Waldron					Builder	Self	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		1,000.00	
Jimmy		Evans					Auto Dealership	Self	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		500.00	
Leon		Norton	Almaville Rd	Smyrna	TN	37167	Bonding Company	Self	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		100.00	
									☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)			

5. TOTAL ITEMIZED CONTRIBUTIONS — 1,600.00

(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 EXPENDITURES - CANDIDATE

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

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

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
First Name: Griffin Strategies LLC	Address: Veterian Parkway	City: Murfreesboro / State: TN	Printing	3,405.00
First Name: Creative Occasions	Address: Sunrise St.	City: Murfreesboro / State: TN / Zip Code: 37130	Printing	75.00
First Name: Teri Baird	Address: Woodbury street	City: Woodbury / State: TN	TV Monitors	194.00
First Name: Hits Alumbi	Address: Manney Ave.	City: Murfreesboro / State: TN / Zip Code: 37130	Advertisement	100.00
First Name / Middle Name / Last Name/Business Name	Address	City / State / Zip Code	Purpose of Expenditure	Amount of Expenditure
First Name / Middle Name / Last Name/Business Name	Address	City / State / Zip Code	Purpose of Expenditure	Amount of Expenditure

5. TOTAL ITEMIZED EXPENDITURES — $ 3,774.00

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD FROM: 4-1-2018 TO: 6-30-2018
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)

Contributor			In-Kind Contribution	
First Name: Phil	Middle Name:		In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	Value of In-Kind Contribution: 300.00
Last Name/Organization Name: Griffin			Date of In-Kind Contribution:	Aggregate this Election:
Address: Veteran Parkway			Description of In-Kind Contribution: Printing	
City: Murfreesboro	State: TN	Zip Code:		
Occupation: Printer	Employer: Self			
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:			Date of In-Kind Contribution:	Aggregate this Election:
Address:			Description of In-Kind Contribution:	
City:	State:	Zip Code:		
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:			Date of In-Kind Contribution:	Aggregate this Election:
Address:			Description of In-Kind Contribution:	
City:	State:	Zip Code:		
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:			Date of In-Kind Contribution:	Aggregate this Election:
Address:			Description of In-Kind Contribution:	
City:	State:	Zip Code:		
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:			Date of In-Kind Contribution:	Aggregate this Election:
Address:			Description of In-Kind Contribution:	
City:	State:	Zip Code:		
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.)	300.00