

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. DATE OF REPORT 7/9/2019	2.a. NAME OF CANDIDATE OR COMMITTEE Paige Brown						
2.b. IF COMMITTEE, NAME OF CANDIDATE Paige Brown	3. ELECTION DATE November 6, 2018						
4.a. CAMPAIGN ADDRESS AND PHONE							
Street or Rural Route 146 North Hume Avenue	City Gallatin	State TN	Zip Code 37066	Phone 615-975-9196			
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) Mayor, City of Gallatin	6. NAME OF POLITICAL TREASURER (may be candidate) Paige Brown						
7. CATEGORY OR REPORT (Check one)							
<input type="checkbox"/> FIRST QUARTER	<input type="checkbox"/> SECOND QUARTER	<input type="checkbox"/> THIRD QUARTER	<input checked="" 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 January 16, 2019			8.b. ENDING DATE OF REPORTING PERIOD June 30, 2019				
9. (Check one)							
a. <input checked="" 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 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	7/11/2019 date	 signature of political treasurer	7/11/2019 date				
11. WITNESS SIGNATURE							
 signature of witness	7/11/19 date	 signature of witness	7/11/19 date				
12. SUMMARY							
<b>FILED</b>							
a. BALANCE ON HAND LAST REPORT .....	AM	PM	\$	<u>16,433.34</u>			
<b>JUL 11 2019</b>							
b. TOTAL RECEIPTS THIS PERIOD .....			\$	<u>0</u>			
c. TOTAL DISBURSEMENTS THIS PERIOD .....	<b>SUMNER COUNTY ELECTION COMMISSION</b>		\$	<u>0</u>			
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....			\$	<u>16,433.34</u>			
e. TOTAL LOANS OUTSTANDING .....			\$	<u>0</u>			
f. TOTAL OBLIGATIONS OUTSTANDING .....			\$	<u>0</u>			

