

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>1/15/2023</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>John C. Isbell</u>
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 <u>108 Walton Trace N</u> <u>Hendersonv. 11e</u> <u>TN</u> <u>37075</u> <u>615.264.2209</u>	
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) <u>County Mayor</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Leonard A. Davis</u>
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 <u>October 1, 2022</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>January 15, 2023</u>
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.	
<u>[Signature]</u> signature of candidate	<u>1/15/2023</u> date
<u>[Signature]</u> signature of political treasurer	<u>1-15-23</u> date
11. WITNESS SIGNATURE <u>[Signature]</u> signature of witness	<u>1/15/23</u> date
<u>[Signature]</u> signature of witness	<u>1/15/23</u> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>15049.27</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>-0-</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>2,940.24</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>12,109.03</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>-0-</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>-0-</u>



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <p style="text-align: center; margin: 0;"><u>John C. Isabel</u></p>	14. REPORT COVERING THE PERIOD FROM: <u>10/1/22</u> TO: <u>1/15/23</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ -0-

b. Itemized Contributions (over \$100 from each source this period) \$ -0-

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ -0-

16. LOANS RECEIVED THIS REPORTING PERIOD \$ -0-

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0-

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ -0-

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)

<u>Donations</u>	\$	<u>200.00</u>
<u>Social Media</u>	\$	<u>12.99</u>
<u>Software</u>	\$	<u>49.99</u>
<u>Chamber lunches</u>	\$	<u>60.00</u>
<u>Voter Data</u>	\$	<u>75.00</u>
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____

Total of Expenditures (\$100 or less each payee) \$ 397.98

b. Itemized Expenditures (Over \$100 each payee this period) \$ 2542.26

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 2940.24

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

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 2940.24

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ -0-

b. Itemized in-kind contributions (over \$100 from each source this period) \$ -0-

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ -0-

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0-

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0-

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ -0-



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE John C. Isbell		2. REPORT COVERING THE PERIOD	
		FROM: 10/1/22	TO: 1/15/23
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount -0-
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name Janna	Middle Name	Purpose of Expenditure Contribution	Amount of Expenditure \$ 250.00
Last Name/Business Name Garton			
Address 101 Glance Ct			
City Hendersonville	State TN	Zip Code 37075	
First Name	Middle Name	Purpose of Expenditure Donation/Event	Amount of Expenditure 200.00
Last Name/Business Name Gallatin Chamber			
Address 118 W. Main St			
City Gallatin	State TN	Zip Code 37066	
First Name	Middle Name	Purpose of Expenditure Dues	Amount of Expenditure 190.00
Last Name/Business Name Rotary			
Address P.O. Box 473			
City Hendersonville	State TN	Zip Code 37079	
First Name	Middle Name	Purpose of Expenditure Event	Amount of Expenditure 170.00
Last Name/Business Name VSEC			
Address 1480 Nashville Pike			
City Gallatin	State TN	Zip Code 37066	
First Name	Middle Name	Purpose of Expenditure Dues	Amount of Expenditure 190.00
Last Name/Business Name Rotary			
Address P.O. Box 473			
City Hendersonville	State TN	Zip Code 37077	
First Name	Middle Name	Purpose of Expenditure Donation	Amount of Expenditure 200.00
Last Name/Business Name Children are People			
Address 117 E. Winchester St			
City Gallatin	State TN	Zip Code 37066	
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.)			\$ 1,200.00



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <p style="text-align: center; font-size: 1.2em;">John C. Isbell</p>			2. REPORT COVERING THE PERIOD FROM: 10/1/22 TO: 1/15/23		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$1,200.00		
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 <p style="text-align: center; font-size: 1.2em;">Rosemont</p>		Donation		120.00	
Address <p style="text-align: center; font-size: 1.2em;">810 S. Water Ave</p>					
City <p style="text-align: center; font-size: 1.2em;">Gallatin</p>	State <p style="text-align: center; font-size: 1.2em;">TN</p>				Zip Code <p style="text-align: center; font-size: 1.2em;">37066</p>
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name <p style="text-align: center; font-size: 1.2em;">Direct Edge</p>		Mailer		432.26	
Address <p style="text-align: center; font-size: 1.2em;">2000 Glen Echo Rd #207</p>					
City <p style="text-align: center; font-size: 1.2em;">Nashville</p>	State <p style="text-align: center; font-size: 1.2em;">TN</p>				Zip Code <p style="text-align: center; font-size: 1.2em;">37215</p>
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name <p style="text-align: center; font-size: 1.2em;">Trailblazer</p>		Database		600.00	
Address <p style="text-align: center; font-size: 1.2em;">5832 Lincoln Dr Suite 149</p>					
City <p style="text-align: center; font-size: 1.2em;">Edina</p>	State <p style="text-align: center; font-size: 1.2em;">MN</p>				Zip Code <p style="text-align: center; font-size: 1.2em;">55436</p>
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name <p style="text-align: center; font-size: 1.2em;">Rotary</p>		Donation		190.00	
Address <p style="text-align: center; font-size: 1.2em;">P.O. Box 473</p>					
City <p style="text-align: center; font-size: 1.2em;">Hendersonville</p>	State <p style="text-align: center; font-size: 1.2em;">TN</p>				Zip Code <p style="text-align: center; font-size: 1.2em;">37077</p>
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.)				\$2,542.26	

