

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>April 3, 2022</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Jawon K. Lauderdale</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>N/A</u>		3. ELECTION DATE <u>May 3, 2022</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>374 Farris Cir</u> <u>Gallatin</u> <u>TN</u> <u>37066</u> <u>615-268-8554</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 Commissioner District 13</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Gary Lauderdale</u>	
7. CATEGORY OF REPORT (Check one) <input checked="" type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input 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>1/16/2022</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>3/31/2022</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>Jawon K. Lauderdale</u> <u>4-3-22</u> <u>Gary U. Lauderdale</u> <u>4-3-22</u> signature of candidate date signature of political treasurer date			
11. WITNESS SIGNATURE <u>Kellie Bruster</u> <u>4-3-2022</u> <u>Kellie Bruster</u> <u>4-3-2022</u> signature of witness date signature of witness date			
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>N/A</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>6,665.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>2,854.44</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>3,810.06</u>	
APR 11 2022			
e. TOTAL LOANS OUTSTANDING		\$ <u>0</u>	
SUMNER COUNTY ELECTION COMMISSION			
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jawon Lauderdale				2. REPORT COVERING THE PERIOD FROM: 1-16-2022 TO: 3-31-2022	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$0.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Joseph		Middle Name		Contribution Received For:	
Last Name/Organization Name Jackson		Address 370 Shelley Renee		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City Memphis		State TN		Date of Contribution 3-24-2022	
Occupation Police Officer		Zip Code 38018		Amount of Contribution \$1600.00	
Employer Memphis Police Department				Aggregate This Election \$1600.00	
First Name Derrick		Middle Name		Contribution Received For:	
Last Name/Organization Name Jackson		Address 124 Mimosa Drive		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City Gallatin		State TN		Date of Contribution 3-13-2022	
Occupation Pastor		Zip Code 37066		Amount of Contribution \$1600.00	
Employer First Baptist Church				Aggregate This Election \$1600.00	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name Sumner County Democratic Party		Address P.O. Box 51		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City Gallatin		State TN		Date of Contribution 3-13-2022	
Occupation		Zip Code 37066		Amount of Contribution \$2500.00	
Employer				Aggregate This Election \$2500.00	
First Name Paul		Middle Name E		Contribution Received For:	
Last Name/Organization Name Turner		Address 100 Elm Hill Cir		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City Hendersonville		State TN		Date of Contribution 3-3-2022	
Occupation retired		Zip Code 37075		Amount of Contribution \$200.00	
Employer				Aggregate This Election \$200.00	
5. TOTAL ITEMIZED CONTRIBUTIONS (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.)					\$5900.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Jawon Lauderdale</i>				2. REPORT COVERING THE PERIOD FROM: <i>1-16-2022</i> TO: <i>3-31-2022</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>\$5900.00</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Archilene</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Lauderdale</i>		Address <i>3444 Hartsville Pike</i>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City <i>Castation Springs</i>		State <i>TN</i>		Date of Contribution <i>3-4-2022</i>	
Occupation <i>registered nurse</i>		Zip Code <i>37031</i>		Amount of Contribution <i>\$250.00</i>	
Employer <i>DCI</i>				Aggregate This Election <i>\$250.00</i>	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Date of Contribution	
Occupation		Zip Code		Amount of Contribution	
Employer				Aggregate This Election	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Date of Contribution	
Occupation		Zip Code		Amount of Contribution	
Employer				Aggregate This Election	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Date of Contribution	
Occupation		Zip Code		Amount of Contribution	
Employer				Aggregate This Election	
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(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.)</small>					<i>\$6150.00</i>

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Jawon K. Lauderdale</i>				2. REPORT COVERING THE PERIOD FROM: <i>1-16-2022</i> TO: <i>3-31-2022</i>	
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)					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution	
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.)					

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Jawon K. Lauderdale</i>			2. REPORT COVERING THE PERIOD		
			FROM: <i>1-16-2022</i>	TO: <i>3-31-2022</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>0.00</i>	
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 <i>U.S. Postal Service</i>		<i>Postage</i>		<i>\$844.60</i>	
Address <i>380 Maple Street</i>					
City <i>Gallatin</i>	State <i>TN</i>				Zip Code <i>37066</i>
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name <i>Quality Printing Company</i>		<i>Printing Campaign Postcards</i>		<i>\$1197.38</i>	
Address <i>141 East Eastland Street</i>					
City <i>Gallatin</i>	State <i>TN</i>				Zip Code <i>37066</i>
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name <i>Vista Printing</i>		<i>Signs & Door Hangers</i>		<i>\$140.81</i>	
Address <i>170 Data Drive</i>					
City <i>Waltham</i>	State <i>MA</i>				Zip Code <i>02451</i>
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name <i>Vista Printing</i>		<i>Car Magnets & Flyers</i>		<i>\$257.75</i>	
Address <i>170 Data Drive</i>					
City <i>Waltham</i>	State <i>MA</i>				Zip Code <i>02451</i>
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name <i>Signs on the Cheap</i>		<i>Signs & Wine Stakes</i>		<i>\$414.40</i>	
Address <i>11525 A Stonehollow Drive Ste 100</i>					
City <i>Austin</i>	State <i>TX</i>				Zip Code <i>78758</i>
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name				Purpose of Expenditure
5. TOTAL ITEMIZED EXPENDITURES				<i>\$2854.94</i>	
(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 LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Jawon K Lauderdale</i>				2. REPORT COVERING THE PERIOD FROM: <i>1-16-2022</i> TO: <i>3-31-2022</i>					
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)									
Complete the Following for the Source of the Loan									
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name				Address		Loan Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Date of Loan	
City		State	Zip Code						
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)									
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
<i>Jawon K. Lauderdale</i>			FROM: <i>1-16-2022</i> TO: <i>3-31-2022</i>			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)						