

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4-8-2016</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Dr. Nancy Glover for School Board</u>				
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Nancy Glover</u>				3. ELECTION DATE <u>8-4-16</u>	
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route <u>680 Bay Point Dr</u>		City <u>Gallatin</u>	State <u>TN</u>	Zip Code <u>37066</u>	Phone <u>615-202-0615</u>
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)					
Street or Rural Route <u>Same</u>		City	State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if applicable) <u>School Board District 6</u>			6. NAME OF POLITICAL TREASURER (may be candidate) <u>Beverly Coley</u>		
7. CATEGORY OR 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>1-16-2016</u>			8.b. ENDING DATE OF REPORTING PERIOD <u>March 31, 2016</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>Nancy Glover</u> signature of candidate		<u>4-8-16</u> date		<u>Beverly Coley</u> signature of political treasurer	
				<u>4-8-16</u> date	
11. WITNESS SIGNATURE					
<u>Zach [Signature]</u> signature of witness		<u>4-8-16</u> date		<u>Zach [Signature]</u> signature of witness	
				<u>4-8-16</u> date	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT \$ <u>0</u>					
b. TOTAL RECEIPTS THIS PERIOD P.M. \$ <u>4,734.⁰⁰</u>					
c. TOTAL DISBURSEMENTS THIS PERIOD A.M. \$ <u>0</u>					
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ <u>4,734.⁰⁰</u>					
e. TOTAL LOANS OUTSTANDING \$ <u>0</u>					
f. TOTAL OBLIGATIONS OUTSTANDING \$ <u>0</u>					

FILED
A.M. APR 11 2016 P.M.
SUMNER COUNTY
ELECTION COMMISSION



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <p style="text-align: center; font-size: 1.2em;">DR. Nancy Glover for School Board</p>	14. REPORT COVERING THE PERIOD FROM: 1/16/16 TO: 3/31/16
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 2834.00 # 2834
b. Itemized Contributions (over \$100 from each source this period)	\$ 1900.00 # 1900
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 4734. ⁰⁰
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.)	\$ 4734. 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)	\$ 0
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 0
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 0
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 0
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 0
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ 139. ⁶⁴ / ₁₀₀
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ 700. ⁰⁰ / ₁₀₀
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ 839. ⁶⁴ / ₁₀₀
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 i item 12.f.)	\$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Nancy Glover</i>				2. REPORT COVERING THE PERIOD FROM: <i>1-16-16</i> TO: <i>3-31-16</i>	
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 <i>Chuck & Sharon</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Allen</i>		Address <i>138 Cragfont Rd</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Castalian Springs</i>		State <i>TN</i>		Zip Code <i>37031</i>	
Occupation <i>retired</i>		Employer		Date of Contribution <i>2-29-16</i>	
				Amount of Contribution <i>\$250.⁰⁰</i>	
				Aggregate This Election <i>\$250.⁰⁰</i>	
First Name <i>Anne</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Barnes</i>		Address <i>258 Mann Road</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Lebanon</i>		State <i>TN</i>		Zip Code <i>37087</i>	
Occupation <i>retired</i>		Employer		Date of Contribution <i>2-8-16</i>	
				Amount of Contribution <i>\$400.⁰⁰</i>	
				Aggregate This Election <i>400.⁰⁰</i>	
First Name <i>Jennifer</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Brown</i>		Address <i>3576 Long Hollow Pike</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Goodlettsville</i>		State <i>TN</i>		Zip Code <i>37072</i>	
Occupation <i>Assistant Director</i>		Employer <i>Sumner Co BOE</i>		Date of Contribution <i>2-25-16</i>	
				Amount of Contribution <i>\$150.</i>	
				Aggregate This Election <i>\$150.</i>	
First Name <i>Walter</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Elliott</i>		Address <i>2303 Cooper Road</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Sale Creek</i>		State <i>TN</i>		Zip Code <i>37373</i>	
Occupation <i>retired</i>		Employer		Date of Contribution <i>2-6-16</i>	
				Amount of Contribution <i>\$500</i>	
				Aggregate This Election <i>\$500</i>	
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.)					<i>1300.⁰⁰</i>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Nancy Glover</i>				2. REPORT COVERING THE PERIOD FROM: <i>1-16-16</i> TO: <i>3-31-16</i>			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>1300.⁰⁰</i>		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name <i>Troy</i>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <i>Glover</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$ <i>200.</i>	
Address <i>1074 Martha Lane</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <i>Gallatin</i>		State <i>TN</i>	Zip Code <i>37066</i>	Date of Contribution <i>3-31-16</i>		Aggregate This Election <i>200.</i>	
Occupation <i>self employed</i>							
Employer <i>Charlie's Golf Carts</i>							
First Name <i>Jones</i>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <i>Hamlett</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>250.</i>	
Address <i>759 Rogers Rd</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <i>Gallatin</i>		State <i>TN</i>	Zip Code <i>37066</i>	Date of Contribution <i>2-29-16</i>		Aggregate This Election <i>250.</i>	
Occupation <i>retired</i>							
Employer							
First Name <i>Joe</i>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <i>Whitaker</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>150.</i>	
Address <i>1045 Stearn Plant Rd</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <i>Gallatin</i>		State <i>TN</i>	Zip Code <i>37066</i>	Date of Contribution <i>3-1-16</i> <i>3-1-16</i>		Aggregate This Election <i>150.</i>	
Occupation							
Employer <i>best effort</i>							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation							
Employer							
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.)					<i>\$1900.</i>		

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Nancy Glover</i>				2. REPORT COVERING THE PERIOD FROM: <i>1-16-16</i> TO: <i>3-31-16</i>			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>		
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 <i>Charlie</i>		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Value of In-Kind Contribution <i>\$150</i>	
Last Name/Organization Name <i>Glover</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
Address <i>680 Bay Point Drive</i>				Date of In-Kind Contribution <i>3-31-16</i>		Aggregate this Election <i>150</i>	
City <i>Gallatin</i>		State <i>TN</i>	Zip Code <i>37066</i>			Description of In-Kind Contribution <i>room rental @ Civic Center</i>	
Occupation <i>services Golf Carts</i>		Employer <i>self</i>					
First Name <i>Floyd</i>		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Value of In-Kind Contribution <i>\$150.</i>	
Last Name/Organization Name <i>Malone</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
Address <i>903 Yellow Stone Court</i>				Date of In-Kind Contribution <i>3-31-16</i>		Aggregate this Election <i>150</i>	
City <i>Gallatin</i>		State <i>TN</i>	Zip Code <i>37066</i>			Description of In-Kind Contribution <i>Bar-B-Q, buns, tea</i>	
Occupation <i>Caterer</i>		Employer <i>Summer BOE</i>					
First Name <i>Rachelle</i>		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Value of In-Kind Contribution <i>\$300.</i>	
Last Name/Organization Name <i>Phelps</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
Address <i>211 Crooked Creek Lane</i>				Date of In-Kind Contribution <i>2-15-16</i>		Aggregate this Election <i>300</i>	
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>			Description of In-Kind Contribution <i>shirts</i>	
Occupation <i>child care</i>		Employer <i>Summer B of Ed</i>					
First Name <i>Rachelle</i>		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Value of In-Kind Contribution <i>100</i>	
Last Name/Organization Name <i>Phelps</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
Address <i>211 Crooked Creek Lane</i>				Date of In-Kind Contribution <i>3-31-16</i>		Aggregate this Election <i>400</i>	
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>			Description of In-Kind Contribution <i>event supplies</i>	
Occupation <i>child care</i>		Employer <i>Summer BOE</i>					
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)			
Address				Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code			Description of In-Kind Contribution	
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.)					<i>\$700.⁰⁰/₁₀₀</i>		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Nancy Glover</i>			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	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		
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		
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.)				

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Nancy Glover</i>	2. REPORT COVERING THE PERIOD FROM: _____ TO: _____
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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:		Date of Loan	
City			<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
State		Zip Code	<input type="checkbox"/> Runoff (Local Elections Only)			

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			
City	State	City	State
Zip Code		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			
City	State	City	State
Zip Code		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			
City	State	City	State
Zip Code		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			
City	State	City	State
Zip Code		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>Nancy Glover</i>			FROM:		TO:	
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.)						