

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4-4-16</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Sarah Andrews</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>August 4, 2016</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>101 Forest Drive</u> <u>Hendersonville</u> <u>TN</u> <u>31015</u> <u>615 337 1887</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>School Board District 4</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>James H. Pedigo</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>2-21-16</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>3-31-16</u>
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.	
<u>Sarah Andrews</u> signature of candidate	<u>4-7-16</u> date
<u>James H. Pedigo</u> signature of political treasurer	<u>4/5/2016</u> date
11. WITNESS SIGNATURE <u>[Signature]</u> signature of witness	<u>4-7-16</u> date
<u>[Signature]</u> signature of witness	<u>4/5/2016</u> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>0</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>850</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ _____
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>850</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>500</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ _____

FILED
A.M. P.M.
APR 07 2016
SUMNER COUNTY
ELECTION COMMISSION



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD	
	FROM: <u>2-21-16</u>	TO: <u>3-31-16</u>

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

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

b. Itemized Contributions (over \$100 from each source this period) \$ 350

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 350

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 500

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ _____

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 850

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) \$ _____

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

20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____

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

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 90.00

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.) \$ 90

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 in item 12.f.) \$ _____



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Sarah Andrews		2. REPORT COVERING THE PERIOD FROM: 2-2-16 TO: 3-31-16	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name Leslie		Middle Name	
Last Name/Organization Name Schell		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1558B Brinkley Branch Rd		<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075	Amount of Contribution \$250.00
Occupation Commissioner		Date of Contribution 3-31-16	
Employer Sumner County		Aggregate This Election	
First Name Andrew		Middle Name	
Last Name/Organization Name COX		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 107 Glen Oaks Blvd Ste 102		<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075	Amount of Contribution \$100.00
Occupation dentist		Date of Contribution 3-29-16	
Employer self		Aggregate This Election	
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Amount of Contribution
Occupation		Date of Contribution	
Employer		Aggregate This Election	
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Amount of Contribution
Occupation		Date of Contribution	
Employer		Aggregate This Election	
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.)			\$350.00

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE

Sarah Andrews

2. REPORT COVERING THE PERIOD

FROM: *2-21-14* TO: *3-31-14*

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 <i>Sarah</i>	Middle Name	Outstanding Loan Balance (Beginning of Period)	Loans Received <i>500</i>	Loan Payments	Outstanding Loan Balance (End of Period) <i>500</i>
Last Name/Organization Name <i>Andrews</i>		Loan Received For:		Date of Loan <i>3/23/14</i>	
Address <i>1011 Forestpointe</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election			
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	<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		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		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		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		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)

