

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 4-5-18	2.a. NAME OF CANDIDATE OR COMMITTEE CINDY L. WILLIAMS		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE 5/1/18	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone P.O. BOX 202 GALLATIN TN 37066			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone 1035 GRIDER DRIVE GALLATIN TN 37066 615 260-8440			
5. OFFICE SOUGHT (include district number, if applicable) TRUSTEE		6. NAME OF POLITICAL TREASURER (may be candidate) MARTY NELSON	
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 1/16/18		8.b. ENDING DATE OF REPORTING PERIOD 3/31/18	
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><i>Cindy L. Williams</i></u> <u>4/5/18</u> signature of candidate date		<u><i>Marty Nelson</i></u> <u>4/5/18</u> signature of political treasurer date	
11. WITNESS SIGNATURE			
<u><i>Cindy Cantrell</i></u> <u>4/5/18</u> signature of witness date		<u><i>Cindy Cantrell</i></u> <u>4/5/18</u> signature of witness date	
12. SUMMARY			
FILED			
a. BALANCE ON HAND LAST REPORT		\$ <u>8425.10</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>5265.34</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>4926.99</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>8763.45</u>	
SUMNER COUNTY ELECTION COMMISSION			
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) CINDY L. WILLIAMS	14. REPORT COVERING THE PERIOD FROM: <u>11/16/18</u> TO: <u>3/31/18</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>1865.00</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>3400.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>5265.00</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>.34</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>5265.34</u>
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>PRINTING</u>	\$ <u>80.00</u>
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>80.00</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>4846.99</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>4926.99</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>0</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>4926.99</u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u>40.95</u>
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.)	\$ <u>40.95</u>
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 i item 12.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE CINDY L WILLIAMS				2. REPORT COVERING THE PERIOD FROM: 1/16/18 TO: 3/31/18		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 2	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name MARJORIE		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name HUFFAKER				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		150.00
Address 1916 FRIENDSHIP ROAD				<input type="checkbox"/> Runoff (Local Elections Only)		
City CROSS PLAINS		State TN	Zip Code 37049	Date of Contribution 1/30/18		250.00
Occupation RETIRED				Aggregate This Election		
Employer						
First Name MARILYN		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name BRISTOL				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		200.00
Address 119 ASHLAND POINT				<input type="checkbox"/> Runoff (Local Elections Only)		
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 1/30/18		
Occupation				Aggregate This Election		
Employer REMAX CHOICE PROPERTIES						
First Name DAVID		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name ALLEN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		400.00
Address 2025 LIBERTY LANE				<input type="checkbox"/> Runoff (Local Elections Only)		
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 2/23/18		
Occupation				Aggregate This Election		
Employer ALLEN MOTORS						
First Name JOHN		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name WILLIAMS				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		700.00
Address 2053 CAGES BEND ROAD				<input type="checkbox"/> Runoff (Local Elections Only)		
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 2/28/18		
Occupation				Aggregate This Election		
Employer SUMNER COUNTY ORNAMENTAL						
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.)					1450.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE CINDY L. WILLIAMS		2. REPORT COVERING THE PERIOD FROM: 1/16/18 TO: 3/31/18	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 1450.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name ROBERT	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	Amount of Contribution 250.00
Last Name/Organization Name GOODALL		<input type="checkbox"/> Runoff (Local Elections Only)	
Address 393 MAPLE STREET		Date of Contribution 2/28/18	Aggregate This Election
City GALLATIN	State TN	Zip Code 37066	
Occupation			
Employer GOODALL BUILDERS			
First Name RICHARD	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	Amount of Contribution 250.00
Last Name/Organization Name ROWLETT		<input type="checkbox"/> Runoff (Local Elections Only)	
Address 2003 CRENCOR DRIVE		Date of Contribution 3/8/18	Aggregate This Election
City GOODLETTSVILLE	State TN	Zip Code 37072	
Occupation			
Employer ROWLETT ADVERTISING			
First Name MARJORIE	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	Amount of Contribution 50.00
Last Name/Organization Name HUFFAKER		<input type="checkbox"/> Runoff (Local Elections Only)	
Address 1916 FRIENDSHIP ROAD		Date of Contribution 3/8/18	Aggregate This Election
City CROSS PLAINS	State TN	Zip Code 37049	
Occupation RETIRED			
Employer			
First Name BETTY	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	Amount of Contribution 200.00
Last Name/Organization Name GREGORY		<input type="checkbox"/> Runoff (Local Elections Only)	
Address 159 STANLEY DRIVE		Date of Contribution 3/16/18	Aggregate This Election
City GALLATIN	State TN	Zip Code 37066	
Occupation RETIRED			
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.)			2200.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE CINDY L. WILLIAMS		2. REPORT COVERING THE PERIOD FROM: 1/16/16 TO: 3/31/16	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 2200.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name PHILLIP	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution 250.00
Last Name/Organization Name BRADSHAW		Date of Contribution 3/16/18	Aggregate This Election
Address 199 BRADSHAW LANE			
City PORTLAND	State TN	Zip Code 37148	
Occupation RETIRED			
Employer			
First Name MARJORIE	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution 50.00
Last Name/Organization Name HUFFAKER		Date of Contribution 3/16/18	Aggregate This Election
Address 1916 FRIENDSHIP ROAD			
City CROSS PLAINS	State TN	Zip Code 37049	
Occupation RETIRED			
Employer			
First Name BETTY	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution 200.00
Last Name/Organization Name GREGORY		Date of Contribution 3/21/18	Aggregate This Election
Address 159 STANLEY DRIVE			
City GALLATIN	State TN	Zip Code 37066	
Occupation RETIRED			
Employer			
First Name	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution 200.00
Last Name/Organization Name FOUR WAY MOTORS		Date of Contribution 3/26/18	Aggregate This Election
Address 1368 EAST BROADWAY			
City GALLATIN	State TN	Zip Code 37066	
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.)			2900.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE CINDY L. WILLIAMS				2. REPORT COVERING THE PERIOD	
				FROM: 1/16/18	TO: 3/31/18
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 2900.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name CAROL		Middle Name		Contribution Received For:	
Last Name/Organization Name BEECH				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 403 RICE COURT				<input type="checkbox"/> Runoff (Local Elections Only)	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 3/30/18	
Occupation				Aggregate This Election	
Employer STATE OF TN				Amount of Contribution 500.00	
First Name		Middle Name		Contribution Received For:	
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	
Occupation				Aggregate This Election	
Employer				Amount of Contribution	
First Name		Middle Name		Contribution Received For:	
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	
Occupation				Aggregate This Election	
Employer				Amount of Contribution	
First Name		Middle Name		Contribution Received For:	
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	
Occupation				Aggregate This Election	
Employer				Amount of Contribution	
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>					3400.00

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE CINDY L. WILLIAMS			2. REPORT COVERING THE PERIOD FROM: 11/16/18 TO: 1/31/18		
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		Middle Name		Purpose of Expenditure CAMPAIGN SIGNS	Amount of Expenditure 4163.11
Last Name/Business Name KOM					
Address P.O. Box 639091					
City CINCINNATI	State OH	Zip Code 45263			
First Name		Middle Name		Purpose of Expenditure PRINTING	Amount of Expenditure 148.58
Last Name/Business Name ASAP PRINTING					
Address 116 IMPERIAL BLVD					
City HENDERSONVILLE	State TN	Zip Code 37075			
First Name		Middle Name		Purpose of Expenditure CAMPAIGN SIGNS	Amount of Expenditure 385.30
Last Name/Business Name KISM					
Address P.O. Box 639091					
City CINCINNATI	State OH	Zip Code 45263			
First Name		Middle Name		Purpose of Expenditure ADVERTISING	Amount of Expenditure 150.00
Last Name/Business Name REPUBLICAN PARTY OF SUMNER COUNTY					
Address P.O. Box 1055					
City HENDERSONVILLE	State TN	Zip Code 37077			
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.)				4846.99	