

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>April 9, 2018</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>GENE PHOENIX</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>1</u>	3. ELECTION DATE <u>MAY 1</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route                      City                      State                      Zip Code                      Phone <u>1007 Island Brook</u> <u>Hendersonville</u> <u>TN</u> <u>37075</u> <u>615-673-4983</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 Commission Dist 7</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>JoAnne Kemp</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 checked="" 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>1-1-18</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>3-31-18</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> <u>4-9-18</u> <u>[Signature]</u> <u>4-9-18</u> signature of candidate                      date                      signature of political treasurer                      date	
11. WITNESS SIGNATURE <u>[Signature]</u> _____ signature of witness                      date	11. WITNESS SIGNATURE <u>[Signature]</u> _____ signature of witness                      date
12. SUMMARY a. BALANCE ON HAND LAST REPORT ..... \$ <u>0</u> b. TOTAL RECEIPTS THIS PERIOD ..... \$ <u>\$4600</u> c. TOTAL DISBURSEMENTS THIS PERIOD ..... \$ <u>\$2095.26</u> d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) ..... \$ <u>\$2504.74</u> e. TOTAL LOANS OUTSTANDING ..... \$ <u>0</u> f. TOTAL OBLIGATIONS OUTSTANDING ..... \$ <u>0</u>	





# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>GENE K RHODES</b>				2. REPORT COVERING THE PERIOD FROM: <b>1-18</b> TO: <b>3-31-18</b>			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>0</b>		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <b>GS &amp; F</b>		Address <b>209 10th Ave South</b>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$500<sup>-</sup></b>	
City <b>NASHVILLE</b>		State <b>TN</b>	Zip Code <b>37203</b>	Date of Contribution <b>3-2-18</b>		Aggregate This Election <b>\$500<sup>-</sup></b>	
Occupation		Employer					
First Name <b>STAN &amp; DEBBIE</b>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <b>HARDAWAY</b>		Address <b>1702 NORTH LAWE</b>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$500<sup>-</sup></b>	
City <b>GALLATIN</b>		State <b>TN</b>	Zip Code <b>37066</b>	Date of Contribution <b>3-12-18</b>		Aggregate This Election <b>\$500<sup>-</sup></b>	
Occupation <b>President</b>		Employer <b>HARDAWAY Const</b>					
First Name <b>DAVID</b>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <b>LUCKEY</b>		Address <b>110 CLARNDON DRIVE</b>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$1000<sup>-</sup></b>	
City <b>HEWITSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>3-20-18</b>		Aggregate This Election <b>\$1000<sup>-</sup></b>	
Occupation <b>Owner</b>		Employer <b>SOUTHEASTERN</b>					
First Name <b>Charles</b>		Middle Name <b>C</b>		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <b>Gentry</b>		Address <b>112 Keene Uly S</b>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$1000<sup>-</sup></b>	
City <b>Hewitsonville</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>3-20-18</b>		Aggregate This Election <b>\$1000<sup>-</sup></b>	
Occupation <b>Eng.</b>		Employer <b>Self</b>					
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.)					<b>\$3000<sup>-</sup></b>		

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Gene Rhodes</i>			2. REPORT COVERING THE PERIOD FROM: <i>1-18</i> TO: <i>3-31-18</i>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>0</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>CAPITAL PROMOTIONS</i>				<i>Signs</i>	<i>\$1373.00</i>
Address <i>P.O. Box 231</i>					
City <i>Glen side</i>		State <i>PA</i>	Zip Code <i>19038</i>		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>ASAP Printing</i>				<i>Printing</i>	<i>\$215.22</i>
Address <i>106 Imperial Blvd</i>					
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>AWARD INDUSTRIES</i>				<i>Signs</i>	<i>\$245.81</i>
Address <i>64 Industrial Pl Dr</i>					
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Sumner Co. Republican Party</i>				<i>Ad</i>	<i>\$1521.50</i>
Address <i>PO Box 1055</i>					
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>		
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.)				<i>\$1988.53</i>	

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>GENE &amp; HOPE</b>				2. REPORT COVERING THE PERIOD FROM: <b>2-1-18</b> TO: <b>3-31-18</b>	
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 <b>Bobby</b>		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name <b>SCOTT</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <b>223 Sunset Island Trail</b>		Date of In-Kind Contribution		Value of In-Kind Contribution <b>\$100.00</b>	
City <b>Gallatin</b>		State <b>TN</b>		Zip Code <b>37066</b>	
Occupation <b>owner</b>		Employer <b>Special Paving</b>		Description of In-Kind Contribution <b>T-SHIRTS</b>	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name <b>AWARDO INDUSTRIES</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <b>64 INDUSTRIAL DRIVE</b>		Date of In-Kind Contribution		Value of In-Kind Contribution <b>\$125.00</b>	
City <b>HENDERSONVILLE</b>		State <b>TN</b>		Zip Code <b>37075</b>	
Occupation		Employer		Description of In-Kind Contribution <b>MAGNETS</b>	
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	
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	
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	
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.)					