

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 1-23-19	2.a. NAME OF CANDIDATE OR COMMITTEE CRAIG HAYES	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 1156 JAMESWOOD DR GALLATIN TN 37066 615-347-8671		
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) CITY COUNCIL - DISTRICT 4		6. NAME OF POLITICAL TREASURER (may be candidate) DANIEL HOBT
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input checked="" 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 10/23/2018		8.b. ENDING DATE OF REPORTING PERIOD 1/15/2019
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.		
Signature of candidate: [Signature] date: 1-23-19 Signature of political treasurer: [Signature] date: 1-23-19		
11. WITNESS SIGNATURE		
Signature of witness: [Signature] date: 1-23-19 Signature of witness: [Signature] date: 1-23-19		
12. SUMMARY		
a. BALANCE ON HAND LAST REPORT	\$	<u>722.77</u>
b. TOTAL RECEIPTS THIS PERIOD	\$	<u>0</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$	<u>0</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$	<u>722.77</u>
e. TOTAL LOANS OUTSTANDING	\$	<u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$	<u>0</u>

FILED
A.M. P.M.
JAN 23 REC'D
SUMNER COUNTY
ELECTION COMMISSION

