

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

A.M. FILED  
JUL 23 2018 P.M.  
ELECTORAL SUMNER COUNTY  
COMMISSIONERS

1. DATE OF REPORT <b>7/23/18</b>	2.a. NAME OF CANDIDATE OR COMMITTEE <b>Billy Geminden</b>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <b>8/02/18</b>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route      City      State      Zip Code      Phone <b>1419 Hwy 259      Portland      TN      37148      615-325-9448</b>	
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) <b>Commissioner District #2</b>	6. NAME OF POLITICAL TREASURER (may be candidate) <b>Denise Geminden</b>
7. CATEGORY OR REPORT (Check one) <input 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 <b>July 1, 2018</b>	8.b. ENDING DATE OF REPORTING PERIOD <b>July 23, 2018</b>
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.  <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <p><u>Billy Geminden</u>      <u>7/23/18</u> signature of candidate      date</p> </div> <div style="text-align: center;"> <p><u>Denise Geminden</u>      <u>7/23/18</u> signature of political treasurer      date</p> </div> </div>	
11. WITNESS SIGNATURE  <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <p><u>Amy Geminden</u>      <u>7/23/18</u> signature of witness      date</p> </div> <div style="text-align: center;"> <p><u>Amy Geminden</u>      <u>7/23/18</u> signature of witness      date</p> </div> </div>	
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT .....	\$ <u>1034.16</u>
b. TOTAL RECEIPTS THIS PERIOD .....	\$ <u>3010.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD .....	\$ <u>2505.10</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....	\$ <u>1539.06</u>
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) <i>Billy Geminden</i>	14. REPORT COVERING THE PERIOD FROM: <i>7/01/18</i> TO: <i>7/23/18</i>
<b>RECEIPTS</b>	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period) .....	\$ <u><i>2660.00</i></u>
b. Itemized Contributions (over \$100 from each source this period) .....	\$ <u><i>350.00</i></u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) .....	\$ <u><i>3010.00</i></u>
16. LOANS RECEIVED THIS REPORTING PERIOD .....	\$ <u><i>0</i></u>
17. INTEREST RECEIVED THIS REPORTING PERIOD .....	\$ <u><i>0</i></u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) .....	\$ <u><i>3010.00</i></u>
<b>DISBURSEMENTS</b>	
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><i>Postage</i></u> .....	\$ <u><i>250.00</i></u>
<u><i>Printer Ink &amp; Supplies</i></u> .....	\$ <u><i>218.19</i></u>
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
Total of Expenditures (\$100 or less each payee) .....	\$ <u><i>468.19</i></u>
b. Itemized Expenditures (Over \$100 each payee this period) .....	\$ <u><i>2036.19</i></u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) .....	\$ <u><i>2505.10</i></u>
20. LOAN REPAYMENTS MADE THIS PERIOD .....	\$ <u><i>0</i></u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) .....	\$ <u><i>2505.10</i></u>
<b>22. IN-KIND CONTRIBUTIONS</b>	
a. Unitemized in-kind contributions (\$100 or less from each source this period) .....	\$ _____
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><i>0</i></u>
<b>23. OBLIGATIONS</b>	
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><i>0</i></u>



## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Billy Geminden</b>				2. REPORT COVERING THE PERIOD FROM: <b>7/01/18</b> TO: <b>7/23/18</b>		
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 <b>Tommy + Shirley</b>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>Whittaker</b>		Address <b>756 N Russell St</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		150.00
City <b>Portland</b>		State <b>TN</b>	Zip Code <b>37148</b>	Date of Contribution <b>7/18/18</b>		Aggregate This Election <b>150.00</b>
Occupation		Employer <b>Farmers Bank</b>				
First Name <b>Nancy</b>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>Hodgess</b>		Address <b>100 Main Street</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200.00
City <b>Portland</b>		State <b>TN</b>	Zip Code <b>37148</b>	Date of Contribution <b>7/02/18</b>		Aggregate This Election <b>200.00</b>
Occupation		Employer				
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation		Employer				
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
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.)					<b>350.00</b>	

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Billy Geminden</i>			2. REPORT COVERING THE PERIOD	
			FROM: <i>7/01/18</i>	TO: <i>7/23/18</i>
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 <i>US Postal</i>			<i>Stamps</i>	<i>300.00</i>
Address <i>130 Village DR</i>				
City <i>Portland</i>	State <i>TN</i>	Zip Code <i>37148</i>		
First Name	Middle Name			
Last Name/Business Name <i>Sams Club</i>			<i>Stamps &amp; Printer INK</i>	<i>227.17</i>
Address <i>301 Indian Lake BLVD</i>				
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		
First Name	Middle Name			
Last Name/Business Name <i>Concept One</i>			<i>Hand Bills, Fans Signs &amp; BANNER</i>	<i>509.08</i>
Address <i>210 N Locust AVE</i>				
City <i>Gallatin</i>	State <i>TN</i>	Zip Code <i>37066</i>		
First Name	Middle Name			
Last Name/Business Name <i>Sams Club</i>			<i>Printing Supplies</i>	<i>176.69</i>
Address <i>301 Indian Lake BLVD</i>				
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		
First Name	Middle Name			
Last Name/Business Name <i>Sams Club</i>			<i>Hand Outs</i>	<i>174.61</i>
Address <i>201 INDIAN LAKE BLVD</i>				
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		
First Name	Middle Name			
Last Name/Business Name <i>Sams Club</i>			<i>Printer Ink Labels &amp; Envelopes</i>	<i>151.43</i>
Address <i>301 Indian Lake BLVD</i>				
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		
First Name	Middle Name			
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>1533.98</i>

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Billy Greeninger</i>		2. REPORT COVERING THE PERIOD FROM: <i>7/01/18</i> TO: <i>7/23/18</i>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>1533.98</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>Portland Saw</i>		<i>ADVERTISING</i>	<i>252.00</i>	
Address <i>333 W Main St. Suite F</i>				
City <i>Gallatin</i>	State <i>TN</i>			Zip Code <i>37066</i>
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>Portland Leader</i>		<i>Advertising</i>	<i>250.93</i>	
Address <i>PO Box 1350</i>				
City <i>Aducah</i>	State <i>Ky</i>			Zip Code <i>42002</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		
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>2036.19</i>	