CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

		·			
1. DATE OF REPORT	2.a. NAME OF CANDIDATE Mi Chele Hu	eorcommittee arbin (oi	mmittee to E	lect for County Co	mm KS
2.b. IF COMMITTEE, NAME OF CANDIDATE	1 morett to	<u> </u>	3. ELECTION DATE	cer i g	
Michele Harbin			8-2-18		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	State	Zip Code	Phone I	
1149 Parkers Chac		d TN	37148	615-400-693	3
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route		State	Zip Code	Phone	
5. OFFICE SOUGHT (include district number,	if applicable) 6. N		L TREASURER (may be	e candidate)	
County Commission/Summer	Dist. 2	<u> Kache</u>	1 Mackey		
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH PRE-	RY GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD April 22, 2018	8.b. E	nding date of ref	PORTING PERIOD ZOIS		
9. (Check one)				200 I AND avandi	
 This campaign is exempt from detain tures total \$1,000 or less for this representation. 	led disclosure because contrit orting period. (Complete item	outions (including in- ns 12d., 12e. and 12	-kind) received total \$1,0 2f.)	000 or less AND expendi-	
h This campaign is required to file a d	etailed financial disclosure be	cause contributions		ved total more than \$1,000	
and/or expenditures total more than	\$1,000 for this reporting period	od.			
 I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w benefit of the candidate or for any other no 	tions and expenditures require e swear or affirm that no cami	ed to be reported by paidn contributions !	nave been expended for	e by the Campaign	
Michele Harlingsignature of Candidate	7-9-18 date	Kack	e of political reasurer	7-9-18 date	
11. WITNESS SIGNATURE				_	1
Signature of Witness	07/09/18 Sate	_ <i>Ams</i> sig	<u>Mallur</u>	7 07/09/18 date	
12. SUMMARY)		יא בו הני	2	
a. BALANCE ON HAND LAST REPORT.	P.M.				1-42
b. TOTAL RECEIRUS THIS PERIOD 2.70	18		s conce as	DANGE CONTRACTOR	400
c. TOTAL DISBURSEMENTS THIS PERIOD	UNTY ON 2842	130000			
C. TOTAL DISBURSEMENTS THIS PERIOD G. BALANCE ON HAND 17 (2) Plus 12.6	MN(1)	1322.0	280 4000	KOM ABUTUO	
ELECTIVE STATES			<u> </u>	4000	1
e. TOTAL LOANS OUTSTANDING				\$ <u> </u>	4
f. TOTAL OBLIGATIONS OUTSTANDING	i			\$	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
	FROM: TO:
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	2350.67
a. Unitemized Contributions (\$100 or less from each source this period)	
b. Itemized Contributions (over \$100 from each source this period)	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.	o.)\$
16. LOANS RECEIVED THIS REPORTING PERIOD	
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ 9
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	s DOUGE
DISBURSEMENTS	2743.171
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category	y - e.g., printing, postage, gasoline)
Parade Fee \$50	SI Kickoff Supplies SI \$46.52
Business Cards \$ 41.5	51 346.52
Parade Decor/Attire \$ 47.	15 Voter File \$5000
Parade Candy \$75.	96 950
3×5 Banners \$ 65	.55 Credit Card Fees
Text Message Campaign \$ 75	.00 42.84
Car Magnerite 1 Hat \$ 59.	27 Kickoff Supplies (Ballons)
Kickoff Venue \$555	21.84
1 1 - 	OZ Kickoff Supply'S
	161.35
Total of Expenditures (\$100 or less each payee)	16 80 70
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 1580. 10 \$ 60000000 2342.13
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) .	 _
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>800</u> .00
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ CANOVOCO 2842.12
22.IN-KIND CONTRIBUTIONS	x
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u> </u>
b. Itemized in-kind contributions (over \$100 from each source this period)	s
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and	1 22.b.)\$\$
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	s <u> </u>
b. Itemized Obligations Outstanding (Over \$100 each)	s <u> </u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown	i item 12.f.)\$



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVER	
THE THE PARTY AND THE PARTY AN	ele Harbin FROM: 4/22/18	Amount Amount
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE	E (enter \$0 if first itemized page)	MALLER OF
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (co	ontributions totaling more than \$100 from any contributor Contribution Received For:	Amount of Contribution
First Name Ronald Middle Name		1
Last Name/Organization Name Sheohard Sheohard	Primary Election General Election	\$7500
	Runoff (Local Elections Only)	1
Address 7004 Quander Ka	Date of Contribution	Aggregate This Election
civ Alexandria state A 22307	5 31 18 \$5000 6 23 18 \$2500	1200
Occupation Analyst	(0122) 18 \$7500	\$17500
Employer Deat of Defense	1 4/25/10 425	
First Neme A Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name	Primary Election General Election	\$7.50
Assante	Runoff (Local Elections Only)	\$ 1.00
Address 825 S Browns Lane		At This Charlier
City Gallatin State Zip Carle 701do	Date of Contribution	Aggregate This Election
Occupation	6/14/18	\$107.50
	1	2010
Vol State Comm College	D. C. C. C. David Con	Amount of Contribution
First Name Middle Name	Contribution Received For:	
Last Name/Organization Name	Primary Election General Election	31000
Address	Runoff (Local Elections Only)	'
City Pelham Stay Zip Code 124	Date of Contribution	Aggregate This Election
	6/14/18	100
Occupation Retired		\$11000
Not employed		
First Name Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name	☐ Primary Election ☐ General Election	1 200
Stimpson	Runoff (Local Elections Only)	\$ 200
Address 3795 (0) Rd 26	Date of Contribution	Aggregate This Election
civ Centre SAI 255960		
Occupation Retired	4 30 18	\$ 30000
Employer Not employed	7	
7,001		1000 CD
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)		\$292.50
(If this is the last page of contributions, this amount must be shown in item 15b. of summary.)		<u>l</u>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

Michele Har	bin			2. REPORT COVER		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	ONS FRO	M PRECEDING PAG	E (enter \$0 if first itemized pa	, ,	Amount 292.50	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name Ronald	Middle Name	!	Contribution Received For:	_	Amount of Contribution	
Last Name/Organization Name	1		Primary Election	General Election	\$100	
Address 157 Parkers (haæ	1 Rd	Runoff (Local Elections	Only)	7	
Car Portland	洲	79501148	Date of Contribution	_	Aggregate This Election	
Occupation Retired			may 19,	2018	\$20000	
Employer Not employer	ourc	Ŷ.	' ' '		7	
First Name	Middle Mam		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name	<u> </u>		Primary Election	General Election		
Address			Runoff (Local Election	s Only)		
City	State Zip Code		Date of Contribution		Aggregate This Election	
Occupation						
Employer						
First Name Middle Name			Continuing Descriped For		A contract of October	
			Contribution Received For:		Amount of Contribution	
Last Name/Organization Name	Middle Name	•		General Election	AMOUNT OF CONTINUITION	
Last Name/Organization Name	MUDIE NOTE	•	Primary Election		Amount of Continoution	
	MUDDLE NISTING		Primary Election			
Last Name/Organization Name	State	Zip Code	Primary Election		Aggregate This Election	
Last Name/Organization Name Address			Primary Election			
Last Name/Organization Name Address City			Primary Election			
Last Name/Organization Name Address City Occupation		Zip Code	Primary Election			
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election CRunoff (Local Election Date of Contribution	s Only)	Aggregate This Election	
Last Name/Organization Name Address City Occupation Employer First Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	s Only) General Election	Aggregate This Election	
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	s Only) General Election	Aggregate This Election	
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address	State State Middle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	s Only) General Election	Aggregate This Election Amount of Contribution	
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State State Middle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	s Only) General Election	Aggregate This Election Amount of Contribution	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Michele	TO: 6/30/18						
	Amount						
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 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		Social Media Advertising	\$169.28				
Address 1 Hacker Wi	ay		•				
City Menlo Park	Siana Zip Gode 94205						
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name Victory Store		18x24 Yard Syns	\$435.23				
Address 5200 30th St	SW	, , ,	T				
Davenport	State Zip Code TA 52802						
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name		Campaign Stickers	\$117.37				
Address 8000 Haske	11 Ave	JICKELS					
City Van Nuys	State Zip Code CA 91400						
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name S Clu	b	Kickoff Food Supplies	\$134.16				
Address 301 Indian la	ke Bld	Kickory Load Subbing	1 4,5				
City H'ville -	State Zip Code 37075						
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name Chefs		Kickoff Food	t22000				
	Lothlin St	,					
City Portland	State Zip Code TAI 37 148						
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name CITAONIC OBSES	SsionS	4x4 Signs	\$ 39510				
Address 510 N Brow	advay		, -				
City Portland -	77 39148						
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3, of next page if additional page		1471.14					
(If this is the last page of expenditures, this amount mu	ist be shown in item 19b. of summary.)		1 1127				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	ING THE PERIOD TO: 6/30/18						
			(enter \$0 if first itemized pa	ge)	Amount 1411.14		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)							
First Name	Middle Nam	0	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	tina		Kickoff =	Invites	\$109.64		
Address 141 Fast Eastland St					,		
Cily Gallatin	State	Zip Code 3700e Vo					
First Name	e	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name	<u> </u>						
Address					·		
City	State	Zip Code					
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			-				
Address			İ		į		
City	State	Zip Code	1				
First Name	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name	<u>.</u>						
Address			1				
Cily State Zip Code							
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			_				
Address							
City	State	Zip Code	<u> </u>				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address			_				
City	State	Zip Code					
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional page (If this is the last page of expenditures, this amount mu	s of this form	are used.) n item 19b. of summary.)			\$1580.78		

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE									NG THE PERIOD
Michele Harbin 4/10/2/18 10/30/18						6/30/18			
3. COMPLETE THE APPROPRIATE ITEMS F	OR EACH IT	EMIZ	ED LOAN (1	oans totaling n	nore than \$100 f	from any source	during the per	iod)	
Complete the Following for the Source of the Loan									- Balance
First Name Middle Name Middle Name	B		Outstanding L (Beginning o		Loans Received		Loan yments		nding Loan Balance End of Period)
Last Name/Organization Name 4000) <u>==</u>	<u></u>	5	Date of Loa	_4	10000
Address 1149 Parkers Cho		d	Loan Receive		General E	Election	Date of Loa	1	
Portland State	3714	8		Local Elections		-1 ette el			·= ··
List All Endon		ntors to	or Above Loai	first Name	ice is needed	please attac	n a page)	Middle N	Jama
First Name	Middle Name		· <u>·</u> ···					MINGO	
Last Name/Organization Name				Last Name/Or	ganization Nam	10			
Address				Address					
City	State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name Middle Name			First Name Middle Name					Name	
Last Name/Organization Name			Last Name/Organization Name						
Address		Address							
City	State	Zip C	Code	City State Zip Coo			Zip Code		
Amount Guaranteed Outstanding		-		Amount Guara	anteed Outstand	ding		<u> </u>	
First Name	Middle Name	1		First Name				Middle	Name
Last Name/Organization Name		Last Name/Organization Name							
Address		_		Address				·	
City	State	Zip C	Code	City			***	State	Zip Code
Amount Guaranteed Outstanding				Amount Guar	anteed Outstand	ding			
First Name	First Name Middle Name			First Name Middle Name					
Last Name/Organization Name			Last Name/Organization Name						
Address				Address					··
City	State	Zip C	Code	City				State	Zip Code
Amount Guaranteed Outstanding	•	•		Amount Guar	anteed Outstan	ding			
Totals for all Loans (complete on last page of (Total loans received should also be shown in item 16. on	itemized loa	ans)			Loan Balance of Period)	Loans Received	Lo Payr	an nents	Outstanding Loan Balance (End of Period)
(Total loan payments should also be shown in item 20. on (Total outstanding loan balance should also be shown in ite	summary page.	.}			00		1 -	00	40000