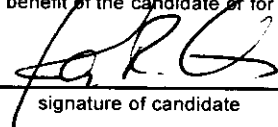





CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT October 6, 2018		2.a. NAME OF CANDIDATE OR COMMITTEE James R. (Jim) Vaughn			
2.b. IF COMMITTEE, NAME OF CANDIDATE Jim Vaughn for County Executive			3. ELECTION DATE May 1, 2018		
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route 2981 Cages Bend Road	City Gallatin	State TN	Zip Code 37066	Phone 615-973-6813	
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) Sumner County Executive			6. NAME OF POLITICAL TREASURER (maybe candidate) Kirk Moser		
7. CATEGORY OR REPORT (Check one)					
<input type="checkbox"/> FIRST QUARTER	<input type="checkbox"/> SECOND QUARTER	<input checked="" type="checkbox"/> THIRD QUARTER	<input type="checkbox"/> FOURTH QUARTER	<input type="checkbox"/> PRIMARY	<input type="checkbox"/> PRE-GENERAL
				<input type="checkbox"/> SUPPLEMENTAL	<input type="checkbox"/> MID-YEAR SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD July 24, 2018			8.b. ENDING DATE OF REPORTING PERIOD September 30, 2018		
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		<u>10-6-2018</u> date		 signature of political treasurer	
				<u>10-6-2018</u> date	
11. WITNESS SIGNATURE					
 signature of witness		<u>10-6-18</u> date		 signature of witness	
				<u>10-6-18</u> date	
12. SUMMARY					
FILED					
OCT 09 2018					
SUMNER COUNTY ELECTION COMMISSION					
a. BALANCE ON HAND LAST REPORT		A.M. <u> </u>		P.M. <u> </u>	
				\$ <u>6508.61</u>	
b. TOTAL RECEIPTS THIS PERIOD				\$ <u>0</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD				\$ <u>199.91</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)				\$ <u>6308.70</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) James R. (Jim) Vaughn	14. REPORT COVERING THE PERIOD FROM: 7/24/2018 TO: 9/30/2018
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$1 00 or less from each source this period) _____	\$ 0
b. Itemized Contributions (over \$1 00 from each source this period) _____	\$ 0
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) _____	\$ 0
16. LOANS RECEIVED THIS REPORTING PERIOD _____	
\$ 0	
17. INTEREST RECEIVED THIS REPORTING PERIOD _____	
\$ 0	
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) _____	
\$ 0	
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)	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee) _____	
\$ _____	
b. Itemized Expenditures (Over \$100 each payee this period) _____	
\$ 199.91	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) _____	
\$ 199.91	
20. LOAN REPAYMENTS MADE THIS PERIOD _____	
\$ 0	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) _____	
\$ 199.91	
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contdbutions (\$100 or less from each source this period) _____	
\$ 0	
b. Itemized in-kind contributions (over \$1 00 from each source this period) _____	
\$ 0	
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) _____	
\$ 0	
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$1 00 or less each) _____	
\$ 0	
b. Itemized Obligations Outstanding (Over \$100 each) _____	
\$ 0	
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) _____	
\$ 0	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE James R. (Jim) Vaughn			2. REPORT COVERING THE PERIOD FROM: 7/24/2018 TO: 9/30/2018		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 0.00	
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 Chocolate Covered Strawberry		Catering service for campaign volunteers		199.91	
Address 2375 Nashville Pike					
City Gallatin	State TN				Zip Code 37066
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address *					
City	State				Zip Code
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				ZIP Code
City	State				ZIP Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				ZIP Code
City	State				ZIP Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
City	State				Zip Code
5. TOTAL ITEMIZED EXPENDITURES				199.91	
(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.) ()					