

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 04/9/2014		2.a. NAME OF CANDIDATE OR COMMITTEE STAN HILGADIACK FOR SUMNER COUNTY SHERIFF	
2.b. IF COMMITTEE, NAME OF CANDIDATE STAN HILGADIACK		3. ELECTION DATE 5/6/2014	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 4321 HIGHWAY 76 COTTONTOWN TN. 37048 615-308-2444			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone SAME			
5. OFFICE SOUGHT (include district number, if applicable) SUMNER COUNTY SHERIFF		6. NAME OF POLITICAL TREASURER (may be candidate) RON SLOAN	
7. CATEGORY OR 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 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 01/15/2014		8.b. ENDING DATE OF REPORTING PERIOD 03/31/2014	
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.			
<i>Stan Hilgadiack</i> signature of candidate		<i>Ron Sloan</i> signature of political treasurer	
4/8/14 date		4/8/14 date	
11. WITNESS SIGNATURE			
<i>Rhonda Hilgadiack</i> signature of witness		<i>Jude Sloan</i> signature of witness	
4/8/14 date		4/8/14 date	
12. SUMMARY			
FILED			
a. BALANCE ON HAND LAST REPORT		\$ <u>672.57</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>5,334.28</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>2,664.52</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>3,342.33</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 STAN HILGADIACK For SUMNER County SHERIFF				2. REPORT COVERING THE PERIOD FROM: 1/15/14 TO: 3/31/14		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name OSCAR		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name CARNEY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		1,000.⁰⁰/_{XX}
Address 920 S. DICKERSON RD.				<input type="checkbox"/> Runoff (Local Elections Only)		
City GOODLETTSVILLE	State TN	Zip Code 37072		Date of Contribution 3/2/2014		Aggregate This Election
Occupation OWNER						
Employer SUMMIT PROPERTY RESTORATION						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name WYATT COMPANY LLC				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		200.⁰⁰/_{XX}
Address 129 FIELD CREST CIRCLE				<input type="checkbox"/> Runoff (Local Elections Only)		
City HENDERSONVILLE	State TN	Zip Code 37075		Date of Contribution 3/5/2014		Aggregate This Election
Occupation						
Employer						
First Name MICHAEL		Middle Name W.		Contribution Received For:		Amount of Contribution
Last Name/Organization Name EDWARDS				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		250.⁰⁰/_{XX}
Address 177 E MAIN				<input type="checkbox"/> Runoff (Local Elections Only)		
City HENDERSONVILLE	State TN.	Zip Code 37075		Date of Contribution 3/4/2014		Aggregate This Election
Occupation ATTORNEY						
Employer						
First Name JAMES		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name PEARCE				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		300.⁰⁰/_{XX}
Address 8428 GUTHRIE RD.				<input type="checkbox"/> Runoff (Local Elections Only)		
City CROSS PLAINS	State TN.	Zip Code 37049		Date of Contribution 3/8/2014		Aggregate This Election
Occupation POLICE OFFICER						
Employer METRO						
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.)					\$1,750.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE STAN HILGADIACK for SUMNER COUNTY SHERIFF			2. REPORT COVERING THE PERIOD FROM: 1/15/14 TO: 3/31/14		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$1,750.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name BETTY		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name HILGADIACK				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	200.⁰⁰/_{XX}
Address 132 LEE ETNA DR.				<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN	State TN.	Zip Code 37066		Date of Contribution 3/15/2014	Aggregate This Election
Occupation RETIRED					
Employer N/A					
First Name RONALD		Middle Name W.		Contribution Received For:	Amount of Contribution
Last Name/Organization Name SLOAN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	500.⁰⁰/_{XX}
Address 1160 DOTBINS PK.				<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN	State TN.	Zip Code 37066		Date of Contribution 3/15/2014	Aggregate This Election
Occupation RETIRED					
Employer N/A					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name PROGREEN RESTORATION LLC				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	250.⁰⁰/_{XX}
Address 600 S. MAIN ST. STE. 222				<input type="checkbox"/> Runoff (Local Elections Only)	
City GOODLETTSVILLE	State TN.	Zip Code 37072		Date of Contribution 3/20/2014	Aggregate This Election
Occupation					
Employer					
First Name CATHERINE		Middle Name G.		Contribution Received For:	Amount of Contribution
Last Name/Organization Name McMURTRY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	300.⁰⁰/_{XX}
Address 2330 BAKER ROAD				<input type="checkbox"/> Runoff (Local Elections Only)	
City GOODLETTSVILLE	State TN.	Zip Code 37072		Date of Contribution 3/14/2014	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.)				3,000.⁰⁰/_{XX}	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE STAN HILGADIACK FOR SUMNER COUNTY SHERIFF			2. REPORT COVERING THE PERIOD FROM: 1/15/14 TO: 3/31/14		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$3,006.⁰⁰ xx		
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 CARNEY MASONRY, INC.				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	\$250.00
Address 166 DOGWOOD SPRINGS RD.				<input type="checkbox"/> Runoff (Local Elections Only)	
City PORTLAND	State TN.	Zip Code 37148		Date of Contribution 3/28/2014	Aggregate This Election
Occupation					
Employer					
First Name CALVIN		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name CARNEY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	\$1,000.00
Address 101 DOGWOOD SPRINGS RD.				<input type="checkbox"/> Runoff (Local Elections Only)	
City PORTLAND	State TN	Zip Code 37148		Date of Contribution 3/28/2014	Aggregate This Election
Occupation OWNER					
Employer CARNEY MASONRY, INC.					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
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				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
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.)					\$250.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE STAN HILGADIACK FOR SUMNER COUNTY SHERIFF				2. REPORT COVERING THE PERIOD FROM: 1/15/14 TO: 3/31/14			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0		
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 RANDY		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
Last Name/Organization Name RUSSELL				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$300.00	
Address				Date of In-Kind Contribution 3/15/2014		Aggregate this Election	
City		State		Zip Code		Description of In-Kind Contribution BAND PLAYED FOR FUNRAISER	
Occupation		Employer					
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		Aggregate this Election	
City		State		Zip Code		Description of In-Kind Contribution	
Occupation		Employer					
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		Aggregate this Election	
City		State		Zip Code		Description of In-Kind Contribution	
Occupation		Employer					
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		Aggregate this Election	
City		State		Zip Code		Description of In-Kind Contribution	
Occupation		Employer					
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.)					\$300.00		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE STAN HILGADACK FOR SUMNER COUNTY SHERIFF			2. REPORT COVERING THE PERIOD FROM: 1/15/14 TO: 3/31/14		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 0	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name WEDDY		Middle Name NICHOLE		Purpose of Expenditure ADVERTISING BUMPER STICKERS ORDERED FROM: MAKESTICKERS.COM	Amount of Expenditure \$169.95
Last Name/Business Name HYERS		Address 5473 N. PINSON ROAD			
City PORTLAND		State TN	Zip Code 37148		
First Name		Middle Name			
Last Name/Business Name REPUBLICAN PARTY OF SUMNER COUNTY		Address P.O. BOX 1055		Purpose of Expenditure TABLE FOR REAGAN DAY DINNER	Amount of Expenditure \$1,000.00
City HENDERSONVILLE		State TN.	Zip Code 37077		
First Name		Middle Name			
Last Name/Business Name SCREEN PLAY, INC.		Address P.O. BOX 1849			
City MADISON		State TN	Zip Code 37115	Purpose of Expenditure PRINTED T-SHIRTS	Amount of Expenditure \$642.39
First Name		Middle Name			
Last Name/Business Name MAIN STREET MEDIA		Address 450 WEST MAIN ST, STE 101			
City GALLATIN		State TN.	Zip Code 37066		
First Name		Middle Name		Purpose of Expenditure ADVERTISING "GET OUT THE VOTE 2014"	Amount of Expenditure \$260.00
Last Name/Business Name SOS PRINTING LLC		Address 706 SPACE PARK NORTH			
City GOODLETTSVILLE		State TN.	Zip Code 37072		
First Name		Middle Name			
Last Name/Business Name		Address		Purpose of Expenditure	Amount of Expenditure
City		State	Zip Code		
First Name		Middle Name			
Last Name/Business Name		Address			
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.)				\$2,482.03	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD					
<i>STAN HILGADIACK FOR SUMNER COUNTY SHERIFF</i>				FROM: <i>1/15/14</i>		TO: <i>3/31/14</i>			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)									
Complete the Following for the Source of the Loan									
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name				Address		Loan Received For:		Date of Loan	
City		State	Zip Code	<input type="checkbox"/> Primary Election		<input type="checkbox"/> General Election		<input type="checkbox"/> Runoff (Local Elections Only)	
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)									
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
City		State	Zip Code	City		State	Zip Code	Amount Guaranteed Outstanding	
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
City		State	Zip Code	City		State	Zip Code	Amount Guaranteed Outstanding	
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
City		State	Zip Code	City		State	Zip Code	Amount Guaranteed Outstanding	
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
City		State	Zip Code	City		State	Zip Code	Amount Guaranteed Outstanding	
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
City		State	Zip Code	City		State	Zip Code	Amount Guaranteed Outstanding	
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
City		State	Zip Code	City		State	Zip Code	Amount Guaranteed Outstanding	
4. Totals for all Loans (complete on last page of itemized loans)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
(Total loans received should also be shown in item 16. on summary page.)				(Total loan payments should also be shown in item 20. on summary page.)		(Total outstanding loan balance should also be shown in item 12.e. on front page.)			



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE STAN HILGADIACK for SUMNER COUNTY SHERIFF		2. REPORT COVERING THE PERIOD FROM: 1/15/14 TO: 3/31/14																		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)		Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">First Name</td> <td style="width: 30%;">Middle Name</td> <td style="width: 30%;"></td> </tr> <tr> <td colspan="3">Last Name/Business Name</td> </tr> <tr> <td colspan="3">Address</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td colspan="3">Description of Obligation</td> </tr> </table>		First Name	Middle Name		Last Name/Business Name			Address			City	State	Zip Code	Description of Obligation						
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4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)																				