

FILED

A.M. APR 10 2014 P.M.

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

SUMNER COUNTY
ELECTION COMMISSION

Form with fields for candidate name (Jo Ann Graves), election date (11-4-14), address (197 Woodlake Dr Gallatin TN), office sought (Mayor of Gallatin), and financial summary (Balance on hand: \$250,194.12).



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jo Ann Graves - Mayor 2014				2. REPORT COVERING THE PERIOD FROM: 1-6-14 TO: 3-31-14			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$500⁰⁰		
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 DHS PROPERTIES				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$250 ⁰⁰	
Address PO BOX 8857				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 3-17-14		Aggregate This Election	
Occupation							
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name HHS PROPERTIES				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$250 ⁰⁰	
Address 1503 Memorial Blvd				<input type="checkbox"/> Runoff (Local Elections Only)			
City Springfield		State TN	Zip Code 37172	Date of Contribution 3-17-14		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							
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.)							

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE To Ann Graves - Mayor 2014			2. REPORT COVERING THE PERIOD FROM: 1-16-14 TO: 3-31-14		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$5810⁷⁵	
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 advertising	Amount of Expenditure \$2,367⁰⁰
Last Name/Business Name LAMAR Outdoor Advertisings					
Address 1993 Southerland Dr.					
City Nashville	State TN	Zip Code 37207			
First Name		Middle Name		Purpose of Expenditure advertising	Amount of Expenditure \$900⁰⁰
Last Name/Business Name The Gallatin News					
Address 450 W. MAIN ST Ste 101					
City GALLATIN	State TN	Zip Code 37066			
First Name		Middle Name		Purpose of Expenditure professional services	Amount of Expenditure \$2,043⁷⁵
Last Name/Business Name Ben Tay Productions					
Address 143 N. Westland Ave					
City Gallatin	State TN	Zip Code 37066			
First Name Jeremy		Middle Name		Purpose of Expenditure professional services	Amount of Expenditure \$500⁰⁰
Last Name/Business Name Duncan					
Address 1006 Burnham Cir.					
City Hendersonville	State TN	Zip Code 37075			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
5. TOTAL ITEMIZED EXPENDITURES <small>(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.)</small>				\$5810⁷⁵	