

SS-1109 (Rev. 1/2023)

#### **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

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

1. Date: 2/26/24 2.a. Candidate or Committee Name: Meghan Broining
2.b. If Committee, Name of Candidate:
4. Campaign Address: 490 (ummings Lanc
4. Campaign Address: 490 (ummings Lanc  City: Gallatin State: TN Zip Code: 37006 Phone: 615 502 0657
5. Candidate Home Address: 490 Cum mings Lane
City:
Candidate Email Address:
6. Office Sought: (include district number, if applicable) School Board - District 8
7. Name of Political Treasurer (may be candidate): Meghan Breinig
Political Treasurer Email Address: meghan for summer, com
8. Category or Report: (check one)
☐ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-Genera
☐ Mid-Year Supplemental ☐ Year-End Supplemental
9. Reporting Period: Start Date: 1/16/24 End Date: 2/24/24
10. Detailed Disclosure: (Check one)
This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
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.
11. 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.
Mal h 2/27/24 Mach 18 - 2/27/21
Candidate Signature Date Political Treasurer Signature Date
Witness Signature Date Witness Signature Date
12. Summary: FILED
a. Balance On Hand Last Report \$ 499.89
b. Total Receipts This Period FEB 2 7 2024 \$ 7,323.06
c. Total Disbursements This Periodsumner county\$ 4,856.49
d. Balance On Hand (12.a. plus 12.b. minus 12.c. s 2,861,46
e. Total Loans Outstanding\$
f. Total Obligations Outstanding

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#### **SUMMARY PAGE - CANDIDATE**

13. Na	me of Candidate or Committee: Meghan Braining		
14. Rep	porting Period: Start Date: 1/16/24 End Date: 2/24/	24	
15. Red	ceipts:		
a.	Unitemized Contributions (\$100 or less from each source this period)		
b.	Itemized Contributions (over \$100 from each source this period)	\$	6,207.01
c.	Loans Received This Reporting Period	\$_	6
d.	Interest Received This Reporting Period	\$_	$\Theta$
e.	Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.)	\$	7,223.06
16. Dis	bursements:		
a.	Total Expenditures (other than loan payments)	\$_	4,856.49
b.	Loan Repayments Made This Period		
c.	Total Obligation Payments Made This Period	\$_	$\Theta$
d.	Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)		
17. ln-l	Kind Contributions:		
a.	Unitemized In-Kind Contributions Received This Period	\$_	0
b.	Itemized In-Kind Contributions Received This Period	\$_	0
c.	Total In-Kind Contributions Received This Period	\$_	0
18. Ob	ligations:		
a.	Total Obligations Outstanding (must be shown in item 12.f.)	\$	0

1. Candidate or Committee Name: Meghan Brainis	
2. Reporting Period: Start Date: 1/16/24 End Date: 2/24/24	
3. Total campaign contributions from preceding page (enter \$0 if first page) \$	Ð
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	OR
First Name: Middle Name: La	st Name: Overton
Address: 901 Lakeview Ct City: Gellatin Sta	
Occupation: VP Employer: Volvateur State	ie Bank
Contribution Received For:  Primary Election  General Election  Ru	unoff (Local Elections Only)
Amount of Contribution: \$ 52.05 Date of Contribution: 1/18/24 Ago	gregate This Election: \$ 52.05
Business or Organization Name:	OR
First Name: Debra Middle Name: La	st Name: Maggart
Address: 112 La Bar Drive City: Henderson ville Sta	ite: TN Zip Code: 37075
Occupation: Policy Advisor Employer: Nelson Malling	
Contribution Received For: Primary Election General Election Ru	unoff (Local Elections Only)
Amount of Contribution: \$ 260.25 Date of Contribution: 1/19/27 Agg	regate This Election: \$ 260,25
Business or Organization Name:	OR
First Name: Wes Middle Name: La	st Name: Wynne
Address: 112 Cassandra Drive City: Cottontown Sta	ite: TV Zip Code: 37048
Occupation: Manager Employer: UPS	
Contribution Received For:  Primary Election  General Election  Ru	inoff (Local Elections Only)
Amount of Contribution: \$ 10 4.10 Date of Contribution: 1/19/24 Agg	regate This Election: \$/0 4.10
Business or Organization Name:	OR
First Name: Middle Name: La	st Name: Farino
Address: 202 Wood lake Prive City: Gallatin Sta	te: TN Zip Code: 37666
Occupation: Employer:	
Contribution Received For:  Primary Election  General Election  Ru	noff (Local Elections Only)
Amount of Contribution: \$ 104.10 Date of Contribution: 1/20/24 Agg	regate This Election: \$ 104.10
Total Contributions: \$ 520, 50	
(Carry forward to the next page if additional pages of this form are used. If this is th	e last page of contributions, this
amount must be shown in the summary on first page.)	

1. Candidate or Committee Name: Meghan Breinis	
2. Reporting Period: Start Date: 1/16/>Y End Date: 2/24/24	
3. Total campaign contributions from preceding page (enter \$0 if first page) \$	
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	
First Name: Middle Name:	Last Name:
Address: 1635 B Huntington Park City: Rochester	State: MT Zip Code: 48309
Occupation: Employer:	
Contribution Received For:	Runoff (Local Elections Only)
Amount of Contribution: \$\(\frac{160.25}{260.25}\) Date of Contribution: \(\frac{1/26/27}{260.25}\)	Aggregate This Election: \$ _ 260.メデ
Business or Organization Name:	OR
First Name: Benjamin Middle Name:	
Address: 1051 Edge water Circle City: Gallatin	
Occupation: Employer:	
Contribution Received For:	Runoff (Local Elections Only)
Amount of Contribution: \$ 50.00 Date of Contribution: 1/30/24	Aggregate This Election: \$_50,00
Business or Organization Name:	OR
First Name: Middle Name:	
Address: 615 Runch Road POBOX 453 City: Portland	
Occupation: Employer:	
Contribution Received For:  Primary Election  General Election	
Amount of Contribution: \$ 200.00 Date of Contribution: 1/30/24	_ Aggregate This Election: \$ 200.00
Business or Organization Name:	OR
First Name: Byleer Middle Name:	Last Name: King
Address: 461 Brady Lune City: Gallotin	
Occupation: Employer:	
Contribution Received For:  Primary Election  General Election	
Amount of Contribution: \$ 50.00 Date of Contribution: 1/30/24	Aggregate This Election: \$ 50.00
Total Contributions: \$	nis is the last page of contributions, this

1. Candidate or Committee Name: Meghan Brainis	_
2. Reporting Period: Start Date: 1/6/24 End Date: 2/24/24	
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,080.75	_
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
	F
First Name: Auron Middle Name: Last Name: Allison	_
Address: 303 Birkshire Place City: Gallatin State: TN Zip Code: 32066	_
Occupation: Employer:	_
Contribution Received For:	
Amount of Contribution: \$\(\frac{100.00}{00.00}\) Date of Contribution: \(\frac{1/30/24}{00.00}\) Aggregate This Election: \$\(\frac{100.00}{00.00}\)	_
Business or Organization Name:	)R
First Name: Tanny Middle Name: Last Name: Mayes	
Address: 120 Governors Point Blud City: Gollotin State: TN Zip Code: 37066	
Occupation: Employer:	
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)	
Amount of Contribution: \$ 200.00 Date of Contribution: 1/30/24 Aggregate This Election: \$ 350.00	_
Business or Organization Name:	P
First Name: Rodny Middle Name: Last Name: Norris	
Address: 1041 Mansker Farms Blad City: Handerson ville State: TN Zip Code: 32075	
Occupation: Softwen Fog Employer: Elestive N.V.	
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	
Amount of Contribution: \$ 308.30 Date of Contribution: 3/1/27 Aggregate This Election: \$ 208.30	_
Business or Organization Name:	R
First Name: Keith Middle Name: Last Name: Hexber	
Address: 262 Sherry Circle City: Oulotin State: IN Zip Code: 32066	
Occupation: Employer:	_
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)	
Amount of Contribution: \$ 52.05 Date of Contribution: 2/1/24 Aggregate This Election: \$ 52.05	_
Total Contributions: \$\( \frac{1,691,00}{1,691,00} \) (Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)	_

1. Candidate or Committee Name: Meghan Braining	
2. Reporting Period: Start Date: 1/16/24 End Date: 2/24/24	
3. Total campaign contributions from preceding page (enter \$0 if first page) \$	The second secon
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	OF
First Name: Middle Name:	Last Name: Sinks
Address: 163 Bay Drive City: Mendensonville	the state of the s
Occupation:retired Employer:	
Contribution Received For:	Runoff (Local Elections Only)
Amount of Contribution: \$ 53.05 Date of Contribution: 2/2/29	Aggregate This Election: \$ 52.05
Business or Organization Name:	OF
First Name: Middle Name:	
Address: 1659 Boardvalk PC City: Golletin	
Occupation: Col Eng Employer: CSD6	
Contribution Received For:	Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 2/4/24	_ Aggregate This Election: \$ 500 ω
Business or Organization Name:	OR
First Name: Stanley Middle Name:	
Address: 303 Bayshore Dr City: Hendersonville	
Occupation: Employer:	
Contribution Received For:  Primary Election  General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 2/5724	Aggregate This Election: \$_500, ω
Business or Organization Name:	OR
First Name: Lynn Middle Name:	Last Name: _Ealey
Address: 1925 Berry Hill Pr City: Nashville	State: TN Zip Code: 37204
Occupation: Coo Employer: Land Solution	Co
Contribution Received For: 🗵 Primary Election 🔲 General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 2/5/24	Aggregate This Election: \$ 5τω.ω
Total Contributions: \$3,193.05	
(Carry forward to the next page if additional pages of this form are used. If the	nis is the last page of contributions, this
amount must be shown in the summary on first page.)	

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1. Candidate or Committee Name: Meghan Breinig	
2. Reporting Period: Start Date: 1/16/24 End Date: 2/34/34	
3. Total campaign contributions from preceding page (enter \$0 if first page) \$	3,193,05
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	OI
First Name: Middle Name:	Last Name: Lcc
Address: 2238 Skylar PL City: Tustin	State: A Zip Code: 92782
Occupation: Program Manager Employer: Alterxx	
Contribution Received For:  Primary Election  General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 52.05 Date of Contribution: 2/6/21	Aggregate This Election: \$ 52,05
Business or Organization Name: Ragan Smith Associates Inc PA	C0I
First Name: Middle Name:	
Address: 315 Woodland St City: Nashville	
Occupation: Employer:	
Contribution Received For: Primary Election General Election	
Amount of Contribution: \$ 500.00 Date of Contribution: 2/7/24	_ Aggregate This Election: \$ \( \subseteq \omega \cdot \omega \om
Business or Organization Name:	OI
First Name: Steven Middle Name:	Last Name: <u>Peters</u>
Address: 307 Hunterwal Dr City: White House	
Occupation: TT Employer: HCA	
Contribution Received For:  Primary Election  General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 52.05 Date of Contribution: 2/8/24	Aggregate This Election: \$ 52.05
Business or Organization Name:	OI
First Name: Middle Name:	Last Name: Piergro
Address: 300 Franklin Roal City: Gollotin	
Occupation: Architect Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 25,00 Date of Contribution: 2/8/24	_ Aggregate This Election: \$ 25.00
Total Contributions: \$ 3,822,15	
(Carry forward to the next page if additional pages of this form are used. If t	his is the last page of contributions, this
amount must be shown in the summary on first page.)	

1. Candidate or Committee Name: Meghan Breinis	
2. Reporting Period: Start Date: 1/6/24 End Date: 3/24/24	
3. Total campaign contributions from preceding page (enter \$0 if first page) \$	3,822.15
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	OF
First Name: Vanic Middle Name:	Last Name: Aporte
Address: 7357 Inlian River Dr City: Colorado Sprins	State: <u>CO</u> Zip Code: <u>80123</u>
Occupation: PM Employer: Alterx	
Contribution Received For:	
Amount of Contribution: \$ 10 4,10 Date of Contribution: 2/4/24	Aggregate This Election: \$ 104.10
Business or Organization Name:	OF
First Name: Payl Middle Name:	
Address: 124 Ceder Crest Drive City: Menderson ville	State: FN Zip Code: 37075
Occupation: Employer:	
Contribution Received For: Primary Election General Election	
Amount of Contribution: \$ 250.00 Date of Contribution: 2/14/24	_ Aggregate This Election: \$ 250.ω
Business or Organization Name:	OF
First Name: Alvin Middle Name:	
Address: 761 Plantation Blvd City: Gallatin	State: TV Zip Code: 37066
Occupation: Employer:	
Contribution Received For:  Primary Election  General Election	
Amount of Contribution: \$ 500.00 Date of Contribution: 3/4/24	
Business or Organization Name:	OF
First Name: Middle Name:	Last Name: _Schnute
Address: 36219 Smith field Rd City: Farming ton	State: MI Zip Code: 48335
Occupation: self employed Employer:	
Contribution Received For:  Primary Election  General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 260.25 Date of Contribution: 2/19/24	Aggregate This Election: \$ 260.45
Total Contributions: \$ 4,936.50	
(Carry forward to the next page if additional pages of this form are used. If the	nis is the last page of contributions, this
amount must be shown in the summary on first page.)	

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1. Candidate or Committee N	Name: Meghan Breinix	
2. Reporting Period: Start D	Date: 1/16/24 End Date: 2/24/24	
	ons from preceding page (enter \$0 if first page) \$	to the common to
COMPLETE THE APPROPRIAT	TE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Na	me:	OR
	Middle Name:	
Address: 390B Douglas	Lane City: Gollatin	State: 1 Zip Code: 37066
Occupation:	Employer:	
	☑ Primary Election ☐ General Election	
Amount of Contribution: \$_2	Date of Contribution: 2/21/24	Aggregate This Election: \$ _⊋ 50. ∞
Business or Organization Na	me:	OR
	Middle Name:	
	City: Co Hon taun	
Occupation:	Employer:	
Contribution Received For:	Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$	SW.00 Date of Contribution: ンタンノンソ	Aggregate This Election: \$_Sω,ω
Business or Organization Na	me:	OR
	Middle Name:	
Address: 1166 Nashville	Pike City: Golfafin	State: TN Zip Code: 37066
Occupation:	Employer:	
Contribution Received For:	☑ Primary Election ☐ General Election	☐ Runoff (Local Elections Only)
Amount of Contribution: \$_5	20.51 Date of Contribution: 3/24/24	Aggregate This Election: \$ 500,57
Business or Organization Na	me:	OR
	Middle Name:	
Address:	City:	State: Zip Code:
Occupation:	Employer:	
Contribution Received For:	☐ Primary Election ☐ General Election	☐ Runoff (Local Elections Only)
Amount of Contribution: \$	Date of Contribution:	Aggregate This Election: \$
Total Contributions: \$6	ر عن ٢,٥١ page if additional pages of this form are used. If t	his is the last page of contributions this
	the summary on first page.)	in is the last page of contributions, this

### **ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE**

1. Candidate or Committee Name: Meyhan Breinig				_
2. Reporting Period: Start Date: 1/6/24 End Date: 2/24/24				
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$	3		:	-
COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., post candidate's name in the purpose of the expenditure section.				n-
Business or Organization Name: Fox Printing				OR
First Name: Middle Name: La				
Address: 931 Old Lebanon Dirt Road City: Hermitage Sta	ate: <u>TV</u>	Zip Code:	37076	
Purpose of Expenditure:				
Amount of Expenditure: \$ 2,853,37 Date of Expenditure: 2/23/2	Υ	_		
Business or Organization Name: De ja Moo				OR
First Name: Middle Name: La	ast Name:		7 - 11	0
Address: 575 Sage Road City: White House Sta	ate: TU	7in Code	37188	
Purpose of Expenditure: Event hosting	atc. <u>The</u>	Zip couc.		
Amount of Expenditure: \$ 162.42 Date of Expenditure: 2/5/24				
Building Market				-
Business or Organization Name: Mr Sign Man				
Address: 129 Commerce Drive City: Hendersonville Sta	ast Name:		72075	_
	ate: JN	Zip Code:	37073	
Purpose of Expenditure: Date of Expenditure:				
				_
Business or Organization Name: Southern Promotions				OR
First Name: Middle Name: La				_
Address: 146 Volunteer Drive City: Hendersonville Sta	ate: TV	Zip Code:	37075	
Purpose of Expenditure:				
Amount of Expenditure: \$ \( \frac{2\partial 3.75}{203.75} \) Date of Expenditure: \( \frac{2\partial 12\partial 2}{2} \)				
Business or Organization Name: Win Red Tech Services				OR
First Name: Middle Name: La	ast Name:			
Address: 1776 Wilson Blud Ste 530 City: Arlington St.			22219	
Purpose of Expenditure: Onlin processing fee				
Amount of Expenditure: \$\(\) 134, P4 \qquad Date of Expenditure: \(\) \(\) \(\) \(\) \(\) \(\) \(\)	†	_		
Total Expenditures: \$	e last page	of expendi	tures, this	

### **ITEMIZED STATEMENT OF LOANS - CANDIDATE**

1. Candidate or Committee Name: Mcgha	h	Branix					
2. Reporting Period: Start Date: 1/16/>Y							
3. Complete the appropriate items for each						(\$100).	
Complete the following for the source of each loan	receive	ed and/or ou	ıtstanding	during the	period.		
Business or Organization Name:							OR
First Name: Mide	dle Na	ame:		L	.ast Name: _		
Address:		City:			State:	_ Zip Code:	
Outstanding Loan Balance (Beginning)		\$					
Loans Received		\$					
Loan Payments		\$					
Outstanding Loan (End)	•••••	\$					
Loan Received For: Primary Election		General Ele	ection	Runof	f (Local Elec	tions Only)	
Date of Loan:							
List all endorsers or guarantors for above loan (If m	ore sp	ace is neede	d. please	attach addit	ional pages.)		
Business or Organization Name:							OR
First Name: Mic							
Address:							
Amount Guaranteed Outstanding: \$							
Business or Organization Name:							
First Name: Mi							
Address:					State:	_ Zip Code:	
Amount Guaranteed Outstanding: \$							
Pusiness or Organization Name							OF
Business or Organization Name: Mi							
Address:		AND THE REAL PROPERTY OF THE PARTY OF THE PA					
Amount Guaranteed Outstanding: \$		city.			State	_ Zip code	
Amount Guaranteed Outstanding: \$							- Always
Business or Organization Name:							OF
First Name: Mi	ddle	Name:			_ Last Nam	e:	
Address:		City:			State:	_ Zip Code:	
Amount Guaranteed Outstanding: \$							
Totals for all loans (Complete this page for each of							nans
Total loans received and loan payments should be should							
Balance (Beginning)		\$	6				
Loans Received		\$	0				
Loan Payments			0	X			
Outstanding Loan (End)		\$	0				

ITEMIZED STATEMENT OF			the latest two or the latest t	
1. Candidate or Committee Name: Mrghan Breiniy	v .			
2. Reporting Period: Start Date: 1/16/24 End Date	te: <u>2/24/24</u>			
3. Complete the appropriate items for each obligation owed to	a person/vendor at th	ne end of the r	eporting period	l.
Business Name:	Description of Obligation:			
First Name: Middle Name:				
Last Name:	-			
Address:	Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance
City:	A	This Period	\$	(Period End)
State: Zip Code:	3	13	13	13
	Description of			
Business Name:	Description of Obligation:			
First Name: Middle Name:	-			
Last Name:	_			. 16
Address:	Outstanding	Debt	Payments This Paried	Outstanding
City:	Balance (Period Beginning)	Incurred This Period	This Period	Balance (Period End)
State: Zip Code:	\$	\$	\$	\$
	_			
Duringes Names	Description of			
Business Name:	Obligation:			
First Name: Middle Name:	-			
Last Name:	_		,	
Address:	Outstanding Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance
City:	Beginning)	This Period	This renou	(Period End)
State: Zip Code:	\$	\$	\$	\$
21p code.				
Business Name:	Description of Obligation:			
First Name: Middle Name:				
Last Name:	_			
Address:	Outstanding Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance
City:	Beginning)	This Period		(Period End)
State: Zip Code:	\$	\$	\$	\$
TOTALS	Outstanding	Debt	Payments	Outstanding
(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the	Balance (Period Beginning)	Incurred	This Period	Balance (Period End)
Total from "Outstanding Balance - (Period End)" column	ė n	e 0	e A	c A

must also be shown on the summary on first page.)