

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>July 7, 2022</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Committee to Elect Hillary Nimmo Lounder</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Hilary Nimmo Lounder</u>	3. ELECTION DATE <u>Aug 4, 2022</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>1401 Shoreside Hendersonville TN 37075 615 969 1642</u>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>1401 Shoreside Dr Hendersonville TN 37075 615 969 1642</u>	
5. OFFICE SOUGHT (include district number, if applicable) <u>School Board - District 3</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Patricia L Collier</u>
7. CATEGORY OR REPORT (Check one)	
<input 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 checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD <u>April 23 2022</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>June 30 2022</u>
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.	
<u>[Signature]</u> signature of candidate	<u>7-8-22</u> date
<u>Patricia L Collier</u> signature of political treasurer	<u>7-7-22</u> date
11. WITNESS SIGNATURE	
<u>[Signature]</u> signature of witness	<u>7-8-22</u> date
<u>Karen Summerford</u> signature of witness	<u>7-7-22</u> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>3571.87</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>2785.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD Deposit + bank fees	\$ <u>2405.72</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>3951.15</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>
FILED	
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>

JUL 11 2022



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <i>Committee to Elect Hilary Nimmo Louder</i>	14. REPORT COVERING THE PERIOD FROM <i>4-23-22</i> TO <i>6-30-22</i>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>1535.00</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>1250.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>2785.00</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ _____
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ _____
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>2785.00</u>
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)	
<u>Bank fees</u>	\$ <u>74.52</u>
<u>Donation to Samaritan Center</u>	\$ <u>100.00</u>
<u>Kroger - meet & greet food</u>	\$ <u>46.14</u>
<u>Micro - Soft - Software</u>	\$ <u>15.28</u>
<u>FaceBook - Ad Booster</u>	\$ <u>50.00</u>
<u>Lowes - sand for Tent</u>	\$ <u>62.85</u>
<u>Speedway - Gas to deliver signs</u>	\$ <u>10.70</u>
.....	\$ _____
.....	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>359.49</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>2046.23</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>2405.72</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ _____
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>2405.72</u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ _____
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ _____
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>0</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ _____
b. Itemized Obligations Outstanding (Over \$100 each)	\$ _____
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Hilary Nimmo Lounder</i>				2. REPORT COVERING THE PERIOD FROM: <i>4-23</i> TO: <i>6-30-22</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Mary</i>		Middle Name <i>Jane</i>		Contribution Received For:	
Last Name/Organization Name <i>Nimmo</i>		Address <i>115 Menees Ln</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Madison</i>		State <i>TN</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation <i>Retired Teacher</i>		Zip Code <i>37115</i>		Date of Contribution <i>May 2, 2022</i>	
Employer				Amount of Contribution <i>500.00</i>	
First Name <i>Deborah</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Grimes</i>		Address <i>936 Lakeshore</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Gallatin</i>		State <i>TN</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation <i>Registered Nurse</i>		Zip Code <i>37066</i>		Date of Contribution <i>May 2, 2022</i>	
Employer <i>Lifepoint Health</i>				Amount of Contribution <i>250.00</i>	
First Name <i>Rebecca</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Mills</i>		Address <i>1553 Hunts Club</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Gallatin</i>		State <i>TN</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation <i>Postpartum Doula</i>		Zip Code <i>37066</i>		Date of Contribution <i>May 2, 2022</i>	
Employer <i>Self</i>				Amount of Contribution <i>250.00</i>	
First Name <i>Steven</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Puckett</i>		Address <i>228 Sanders Ferry Rd</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Hendersonville</i>		State <i>TN</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation <i>Clerk/Stocker</i>		Zip Code <i>37075</i>		Date of Contribution <i>May 17, 2022</i>	
Employer				Amount of Contribution <i>250.00</i>	
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(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.)</small>					Amount <i>1250.00</i>

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Hilary Nimmo Launder</i>			2. REPORT COVERING THE PERIOD FROM: <i>4-23</i> TO: <i>6-30-22</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>0</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 in any payee during the period)				
First Name <i>Krystal</i>	Middle Name	Purpose of Expenditure <i>Campaign T-Shirts</i>	Amount of Expenditure <i>\$130.00</i>	
Last Name/Business Name <i>Frank</i>				
Address <i>919 Hogans Branch Rd</i>				
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		
First Name	Middle Name	Purpose of Expenditure <i>Large yard signs</i>	Amount of Expenditure <i>346.32</i>	
Last Name/Business Name <i>Mr Sign</i>				
Address <i>129 Commerce Dr</i>				
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		
First Name	Middle Name	Purpose of Expenditure <i>Printing for Mailers</i>	Amount of Expenditure <i>1569.91</i>	
Last Name/Business Name <i>Printing ETC</i>				
Address <i>1411 So Dickerson Pk</i>				
City <i>Goodlettsville</i>	State <i>TN</i>	Zip Code <i>37072</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State	Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State	Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State	Zip Code		
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.)			<i>\$2046.23</i>	

NON@

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Hilary Nimmo Lounder</i>				2. REPORT COVERING THE PERIOD	
				FROM: <i>4-23</i>	TO: <i>6-30-22</i>
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
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		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Value of In-Kind Contribution
City	State	Zip Code		Aggregate this Election	
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Value of In-Kind Contribution
City	State	Zip Code		Aggregate this Election	
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Value of In-Kind Contribution
City	State	Zip Code		Aggregate this Election	
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Value of In-Kind Contribution
City	State	Zip Code		Aggregate this Election	
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Value of In-Kind Contribution
City	State	Zip Code		Aggregate this Election	
Occupation	Employer		Description of In-Kind Contribution		
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.)					

NONE

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Hibari Nimmolouder</i>	2. REPORT COVERING THE PERIOD FROM: <i>4-23</i> TO: <i>6-30-22</i>
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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		<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		Last Name/Organization Name	
Address		Address	
City	State	City	State
	Zip Code		Zip Code
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	

4. Totals for all Loans (complete on last page of itemized loans) (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 a, on front page.)	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)



None

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
Committee to Elect Hillary Nunn Louder				FROM: 4-23		TO: 6-30-22	
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)
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							