

Amended



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates

### For Single-Candidate Committees

1. Date: 1/28/24 2.a. Candidate or Committee Name: Tracy Finegan  
 2.b. If Committee, Name of Candidate: - 3. Election Date: \_\_\_\_\_  
 4. Campaign Address: 737 Shyn Pike  
 City: Cottontown State: TN Zip Code: 37045 Phone: 615 974-9227  
 5. Candidate Home Address: Same  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Candidate Email Address: tracyfinegan1@gmail.com  
 6. Office Sought: (include district number, if applicable) School Board - District 8  
 7. Name of Political Treasurer (may be candidate): Tracy Finegan  
 Political Treasurer Email Address: tracyfinegan1@gmail.com

8. Category or Report: (check one)  
 First Quarter  Second Quarter  Third Quarter  Fourth Quarter  Pre-Primary  Pre-General  
 Mid-Year Supplemental  Year-End Supplemental

9. Reporting Period: Start Date: 7/1/2023 End Date: 12/31/2023

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.

<u>[Signature]</u>	<u>1/28/2024</u>	<u>[Signature]</u>	<u>1/28/2024</u>
Candidate Signature	Date	Political Treasurer Signature	Date
<u>Penny Wick</u>	<u>1/28/2024</u>	<u>Penny Wick</u>	<u>1/28/2024</u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report	\$	<u>5,000</u>
b. Total Receipts This Period	\$	<u>758.-</u>
c. Total Disbursements This Period	\$	<u>5006.78</u> <u>4,984.28</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>751.22</u> <u>773.72</u>
e. Total Loans Outstanding	\$	<u>0</u>
f. Total Obligations Outstanding	\$	<u>0</u>

# SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Tracy Finegan

14. Reporting Period: Start Date: 7/1/2023 End Date: 12/31/2023

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 425<sup>00</sup>  
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) ..... \$ ~~0~~
- c. Loans Received This Reporting Period ..... \$ ~~0~~
- d. Interest Received This Reporting Period ..... \$ ~~0~~
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... \$ 425<sup>00</sup>

16. Disbursements:

- a. Total Expenditures (other than loan payments) ..... \$ 4,984.28  
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period ..... \$ ~~0~~
- c. Total Obligation Payments Made This Period ..... \$ ~~0~~
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) ..... \$ 4,984.28

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period ..... \$ 133<sup>00</sup>
- b. Itemized In-Kind Contributions Received This Period ..... \$ ~~0~~
- c. Total In-Kind Contributions Received This Period ..... \$ 133<sup>00</sup>

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) ..... \$ ~~0~~

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Tracy Megan
2. Reporting Period: Start Date: 1/1/2023 End Date: 12/31/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 2

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Stitches by Cindi OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Door magnets  
Amount of Expenditure: \$ 83.03 Date of Expenditure: 10/10/2023

Business or Organization Name: Stitches by Cindi OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: T-shirts  
Amount of Expenditure: \$ 669.70 Date of Expenditure: 11/1/2023

Business or Organization Name: Regions Bank OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Bank fee  
Amount of Expenditure: \$ 11.00 Date of Expenditure: 10/27/2023

Business or Organization Name: SOS Printing OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Push cards  
Amount of Expenditure: \$ 97.23 Date of Expenditure: 11/15/2023

Business or Organization Name: Regions Bank OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Bank fee  
Amount of Expenditure: \$ 11.00 Date of Expenditure: 11/28/2023

Total Expenditures: \$ \_\_\_\_\_

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Tracy Kneegan  
2. Reporting Period: Start Date: 7/1/2023 End Date: 12/31/2023  
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 871.96

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Rachel Allison Photography OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: photos  
Amount of Expenditure: \$ 750.00 Date of Expenditure: 8/19/2023

Business or Organization Name: AGE Graphics OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Signs  
Amount of Expenditure: \$ 2642.50 Date of Expenditure: 8/25/2023

Business or Organization Name: SOS Printing OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: labels  
Amount of Expenditure: \$ 33.87 Date of Expenditure: 9/1/2023

Business or Organization Name: SOS Printing OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: business cards  
Amount of Expenditure: \$ 43.70 Date of Expenditure: 8/25/2023

Business or Organization Name: SOS Printing OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: push cards  
Amount of Expenditure: \$ 136.56 Date of Expenditure: 9/28/2023

Total Expenditures: \$ \_\_\_\_\_  
(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Tracy Finegan  
2. Reporting Period: Start Date: 7/1/2023 End Date: 12/31/2023  
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3,606.63

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: First Place Trophy OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Name Badges  
Amount of Expenditure: \$ 43.70 Date of Expenditure: 7/27/2023

Business or Organization Name: GoDaddy OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Domain name  
Amount of Expenditure: \$ 29.35 Date of Expenditure: 8/4/2023

Business or Organization Name: GoDaddy OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Website hosting  
Amount of Expenditure: \$ 130.97 Date of Expenditure: 8/4/2023

Business or Organization Name: GoDaddy OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Domain name #2  
Amount of Expenditure: \$ 22.14 Date of Expenditure: 8/4/2023

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Kacey Middle Name: \_\_\_\_\_ Last Name: Thornhill  
Address: 755 New Deal Pkts City: Cottontown State: TN Zip Code: 37048  
Purpose of Expenditure: Small magnets deposit  
Amount of Expenditure: \$ ~~8/19/2023~~ 10.00 Date of Expenditure: 8/19/2023

Total Expenditures: \$ \_\_\_\_\_

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Tracy Finegan  
2. Reporting Period: Start Date: 7/1/2023 End Date: 12/31/2023  
3. Total campaign expenditures from preceding page (enter \$0 if first page) ~~\$235~~ 324.18

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: SOS Printing OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: SOS Printing push cards  
Amount of Expenditure: \$ 35.51 Date of Expenditure: 12/20/2023

Business or Organization Name: Regions OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Bank fee  
Amount of Expenditure: \$ 11<sup>00</sup> Date of Expenditure: 12/31/2023

Business or Organization Name: Kacey OR  
First Name: Kacey Middle Name: \_\_\_\_\_ Last Name: Thornhill  
Address: 755 New Deal Potters Rd City: Cottontown State: TN Zip Code: 37048  
Purpose of Expenditure: magnets final payment - Tracy Finegan  
Amount of Expenditure: \$ 100.<sup>00</sup> Date of Expenditure: 9/14/2023

Business or Organization Name: US Post office OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Postage stamps - Tracy Finegan  
Amount of Expenditure: \$ 33.<sup>00</sup> Date of Expenditure: 10/17/2023

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: \_\_\_\_\_  
Amount of Expenditure: \$ \_\_\_\_\_ Date of Expenditure: \_\_\_\_\_

Total Expenditures: \$ \_\_\_\_\_

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)