

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4-26-22</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Brock Burmeister</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>5-3-22</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>1018 Tom Mabrey Dr. Custalium Springs TN 37031 615-500-2826</u>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone	
5. OFFICE SOUGHT (include district number, if applicable) <u>Road Superintendent</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Judy Hardin</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 checked="" 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 <u>4-1-22</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>4-23-22</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>Brock Burmeister</u> <u>4-26-22</u> <u>Judy Hardin</u> <u>4-26-22</u> signature of candidate date signature of political treasurer date	
11. WITNESS SIGNATURE <u>Debra Sutton</u> <u>4-26-22</u> <u>Debra Sutton</u> <u>4-26-22</u> signature of witness date signature of witness date	
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>4909.55</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>1125.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>5667.98</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>366.57</u>
e. TOTAL LOANS OUTSTANDING	AM <u>FILED</u> PM \$ <u>—</u>
f. TOTAL OBLIGATIONS OUTSTANDING	<u>APR 26 2022</u> \$ <u>—</u>



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Brock Burmeister	14. REPORT COVERING THE PERIOD FROM <u>4-1-22</u> TO: <u>4-23-22</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>250</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>875</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>1,125</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>1,125</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)	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>0</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>5667.98</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>5667.98</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>-</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>5667.98</u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u>-</u>
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ <u>-</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>-</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ <u>-</u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>-</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)	\$ <u>-</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brock Burmeister		2. REPORT COVERING THE PERIOD FROM: 4-1-22 TO: 4-23-22		
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 Kevin	Middle Name E.	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name Baigert		<input type="checkbox"/> Runoff (Local Elections Only)		
Address 424 AB Wade Rd		Amount of Contribution 250.00		
City Portland	State TN			Zip Code 37148
Occupation	Date of Contribution 4-1-22			
Employer	Aggregate This Election 250.00			
First Name Mary	Middle Name Ellen	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name Genung		<input type="checkbox"/> Runoff (Local Elections Only)		
Address 1100 Lock four Rd		Amount of Contribution 500.00		
City Gallatin	State TW			Zip Code 37066
Occupation	Date of Contribution 4-12-22			
Employer	Aggregate This Election 500.00			
First Name Collin	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name Zimmerman		<input type="checkbox"/> Runoff (Local Elections Only)		
Address 109 general Smith Pl.		Amount of Contribution 125.00		
City Hendersonville	State TW			Zip Code 37031
Occupation Account Manager	Date of Contribution 4-23-22			
Employer Georgia Pacific	Aggregate This Election 125.00			
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name		<input type="checkbox"/> Runoff (Local Elections Only)		
Address		Amount of Contribution		
City	State			Zip Code
Occupation	Date of Contribution			
Employer	Aggregate This Election			
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.)			875.00	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brock Burmeister			2. REPORT COVERING THE PERIOD FROM 4-1-22 TO: 4-23-22		
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		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		Address		Mailer Printing & Mailing	4576.03
R+G Mailhouse LLC		430 Emitt Ave			
City	State	Zip Code			
Madison	TN	37115			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		Address		Yard Signs & T-Shirts	1,091.95
Mr Sign Man		129 Commerce Dr			
City	State	Zip Code			
Hendersonville	TN	37075			
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		
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.)					5667.98