



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/8/20 2.a. Candidate or Committee Name: Steven J. Carter
2.b. If Committee, Name of Candidate: _____ 3. Election Date: 11/3/2020
4. Campaign Address: 319 Randolph Street
City: Gallatin State: TN Zip Code: 37066 Phone: 615-483-6549
5. Candidate Home Address: 319 Randolph Street
City: Gallatin State: TN Zip Code: 37066 Phone: 615-483-6549
Candidate Email Address: stevenjcarterdistrict5@gmail.com
6. Office Sought: (include district number, if applicable) City of Gallatin Alderman District 5
7. Name of Political Treasurer (may be candidate): Hollie Harris Alexander
Political Treasurer Email Address: hollieaharris@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 ☐ Runoff Election

9. Reporting Period: Start Date: 4/1/2020 End Date: June 30, 2020

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.

Steven J. Carter 7-8-20
Candidate Signature Date

Hollie Alexander 7/8/20
Political Treasurer Signature Date

Arny Harris 7-8-20
Witness Signature Date

Ben Harris 7-8-20
Witness Signature Date

12. Summary:

a. Balance On Hand Last Report **FILED** \$ 0
b. Total Receipts This Period **AM** \$ 1890.00
c. Total Disbursements This Period **PM** \$ 507.50
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) **JUL 09 2020** \$ 1382.50
e. Total Loans Outstanding **SUMNER COUNTY** \$ 0
f. Total Obligations Outstanding **ELECTION COMMISSION** \$ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Steven J. Carter

14. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 340-
(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) \$ 1550-
- c. Loans Received This Reporting Period..... \$ -
- d. Interest Received This Reporting Period \$ -
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 1,890.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 507.50
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ -
- c. Total Obligation Payments Made This Period..... \$ -
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 507.50

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 550-
- c. Total In-Kind Contributions Received This Period \$ 550.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Steven J. Carter

2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24

3. Total campaign contributions from preceding page (enter \$0 if first page) \$ ~~1550~~ 0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Brian & Rhonda Middle Name: - Last Name: Harris
Address: 250 Albright Lane City: Gallatin State: TN Zip Code: 37066
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 4/13/24 Aggregate This Election: \$ 500-

Business or Organization Name: _____ OR

First Name: James Middle Name: - Last Name: Overton

Address: 901 Lakview Court City: Gallatin State: TN Zip Code: 37064

Occupation: VP Volunteer State Bank Employer: Volunteer State Bank

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ 150.00 Date of Contribution: 6/7/24 Aggregate This Election: \$ 150.00

Business or Organization Name: _____ OR _____

First Name: Benjamin Middle Name: Allen Last Name: Harris

Address: 1051 Edgewater Circle City: Gallatin State: TN Zip Code: 37066

Occupation: Codes Inspector Employer: City of Gallatin

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ 100.00 Date of Contribution: 6/7/24 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR _____

First Name: Stanley Middle Name: _____ Last Name: Fields

Address: 303 Bayshore Drive City: Hendersonville State: NC Zip Code: 37075

Occupation: Business Person Employer: Self

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ 500.00 Date of Contribution: 6/7/24 Aggregate This Election: \$ 500.00

Total Contributions: \$ 1,250 —

(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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Steven J. Carter
2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,250

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Charles Middle Name: _____ Last Name: Kimbrough
Address: 48 Wydemene City: Hendersonville State: TN Zip Code: 37075
Occupation: Retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 200 - Date of Contribution: 6/1/24 Aggregate This Election: \$ 200 -

Business or Organization Name: _____ OR
First Name: Mamie Middle Name: _____ Last Name: Branham
Address: 147 Walnut Crest Drive City: Gallatin State: TN Zip Code: 37066
Occupation: _____ Employer: Volunteer State Community College
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 6/11/24 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last 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: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last 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: \$ 1550.00

(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.)

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Steven J. Carter
2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: _____ OR
First Name: Wakeyia Middle Name: _____ Last Name: Carter Bedding
Address: 204 Sam Houston Circle City: Gallatin State: TN Zip Code: 37066
Occupation: _____ Employer: _____
In-Kind Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 250- In-Kind Contribution Date: 6/7/24 Aggregate This Election: \$ 250-
Description of In-Kind Contribution: Event Campaign Kick off

Business or Organization Name: _____ OR
First Name: Jo' Keyia Middle Name: _____ Last Name: Talley
Address: 204 Sam Houston Circle City: Gallatin State: TN Zip Code: 37066
Occupation: _____ Employer: _____
In-Kind Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 100- In-Kind Contribution Date: 6/7/24 Aggregate This Election: \$ 100-
Description of In-Kind Contribution: Event Campaign Kick off

Business or Organization Name: _____ OR
First Name: My'Neca Middle Name: _____ Last Name: Ridley
Address: 1033 Windemere Drive City: Gallatin State: TN Zip Code: 37066
Occupation: _____ Employer: _____
In-Kind Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 100- In-Kind Contribution Date: 6/7/24 Aggregate This Election: \$ 100-
Description of In-Kind Contribution: Event Campaign Kick off

Business or Organization Name: _____ OR
First Name: Latosha Middle Name: _____ Last Name: McKinley
Address: 257 Sata Monica Blvd. City: Gallatin State: TN Zip Code: 37066
Occupation: _____ Employer: _____
In-Kind Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 100- In-Kind Contribution Date: 6/7/24 Aggregate This Election: \$ 100-
Description of In-Kind Contribution: Event Campaign Kick off

Total In-Kind Contributions: \$ 550-

(Carry forward to the 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 the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Steven J. Carter
2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

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: RACE TRAC OR
First Name: — Middle Name: — Last Name: —
Address: 1324 Southwater Ave City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: Gas
Amount of Expenditure: \$ 50- Date of Expenditure: \$ 5/14/24

Business or Organization Name: RACE TRAC OR
First Name: — Middle Name: — Last Name: —
Address: 1324 Southwater Ave City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: Gas
Amount of Expenditure: \$ 200- Date of Expenditure: \$ 6/8/24

Business or Organization Name: Rolling Meadows Risk Placement (Insurance) OR
First Name: — Middle Name: — Last Name: —
Address: 2850 Golf Rd. City: Rolling Meadows State: IL Zip Code: 60008
Purpose of Expenditure: Insurance - Event Rental
Amount of Expenditure: \$ 257.50 Date of Expenditure: \$ 6/12/24

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: \$ —

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: \$ 507.50 -

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Steven J. Carter
2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Outstanding Loan Balance (Beginning) \$ _____
Loans Received \$ _____
Loan Payments \$ _____
Outstanding Loan (End) \$ _____
Loan Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Date of Loan: _____

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ _____
Loans Received \$ _____
Loan Payments \$ _____
Outstanding Loan (End) \$ _____

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Steven J. Carter

2. Reporting Period: Start Date: 4/1/20 End Date: 6/30/20

3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$