

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 4-4-2024 2.a. Candidate or Committee Name: KATHY STVART
2.b. If Committee, Name of Candidate:
4. Campaign Address: 1116 B LITTLETON RANCH RO
City: CASTALIAN SIZEWGS State: TN Zip Code: 37031 Phone: 985-768-6178
5. Candidate Home Address: Same
City: State: Zip Code: Phone:
Candidate Email Address: KACHUL 23 @ BELLSOUTH . NET
6. Office Sought: (include district number, if applicable) School Board District 9
7. Name of Political Treasurer (may be candidate): CHICIS ALEXANDER
Political Treasurer Email Address: CALEXANDER 082685 @ GMAIL - 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: 2/25/24 End Date: 3/31/24
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. Candidate Signature Date Date Witness Signature Date Witness Signature Date Date
12. Summary:
a. Balance On Hand Last Report \$ 200. \$
b. Total Receipts This Period
c. Total Disbursements This 2016d \$ 421.53
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)
e. Total Loans Outstanding f. Total Obligations Outstanding
f. Total Obligations Outstanding \$ 6.40
SS-1109 (Rev. 1/2023)

SUMMARY PAGE - CANDIDATE

13. Na	me of Candidate or Committee: KARIM STURET	
14. Re	porting Period: Start Date: 2/25/24 End Date: 3	131/24
15. Re	ceipts:	
a.	Unitemized Contributions (\$100 or less from each source this period) (Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000.) \$ 365. See Instructions for more information.)
b.	Itemized Contributions (over \$100 from each source this period)	\$ 1,750.00
c.	Loans Received This Reporting Period	5 6200 535.00
d.	Interest Received This Reporting Period	\$ 0.00
e.	Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.)	s 2,650. w
16. Dis	sbursements:	1.1.
a.	Total Expenditures (other than loan payments)(Note: Effective January 16, 2023, all expenditures must be itemized.)	s 421.53
b.	Loan Repayments Made This Period	\$ 0. °°
C.	Total Obligation Payments Made This Period	
d.	Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)	\$ 421.53
17. In-	Kind Contributions:	
a.	Unitemized In-Kind Contributions Received This Period	\$ 6. ⁶
b.	Itemized In-Kind Contributions Received This Period	
c.	Total In-Kind Contributions Received This Period	5 500. €
18. Ob	ligations:	
a.	Total Obligations Outstanding (must be shown in item 12.f.)	c 0.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: KATHY STURKT	
2. Reporting Period: Start Date: 2/25/24 End Date: 3/31/24	
3. Total campaign contributions from preceding page (enter \$0 if first page) \$	0
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	OR
First Name: ELIZABETH Middle Name: PAIGE	Last Name: Brown
Address: 146 N. Hume Ave City: GALLATIN	State: TN Zip Code: 37066
Occupation: Mayor Employer: City of	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 2/29/24	Aggregate This Election: \$ 100. 00
Business or Organization Name:	OR
First Name: Tommy SHIRLEY Middle Name:	Last Name: WHITTAKER
Address: 756 N. Russey ST City: PORTLAND	State: TN Zip Code: 37148
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 200.00 Date of Contribution: 2/29/24	
Business or Organization Name:	OR
First Name: MARK HAKRISON Middle Name:	Last Name: HAZIZISON
Address: 105 BLOOMSBURY PIZIVE City: POZTLAND	State: TN Zip Code: 37148
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 200. \(\infty \) Date of Contribution: 2 \(\beta \) \(\beta \)	Aggregate This Election: \$ 200. 60
Business or Organization Name:	OR
First Name: MICHAEL Middle Name:	Last Name: FAILIND
Address: 202 Woodlake Diz City: GALLATIN	State: TN Zip Code: 37066
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 26964	Aggregate This Election: \$ 100. 5
Total Contributions: \$ 600. 60 (Carry forward to the next page if additional pages of this form are used. If the amount must be shown in the summary on first page.)	nis is the last page of contributions, this

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: KATHY STUGET	
2. Reporting Period: Start Date: 2/25/21 End Date: 3/31/24	
3. Total campaign contributions from preceding page (enter \$0 if first page) \$	600. w
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	dia t
Business or Organization Name:	OR
First Name: JOWATHAN 4 ANGLE Middle Name:	Last Name: BRANDON
Address: 1132 MEADOW BRIDGE DR City: ARRIVETON	State: TW Zip Code: 37014
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 2/25/24	Aggregate This Election: \$ 500. *
Business or Organization Name:	OR
First Name: At + Decarre Middle Name:	Last Name: DeWirt
Address: 898 PLANTATION BUD City: GALLATIN	State: TN Zip Code: 37066
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 2/29/29	Aggregate This Election: \$ 100. 6
Business or Organization Name:	OR
First Name: Middle Name:	Last Name: OTT
Address: 145 ZIEGLER FT. 120. City: GALLATIN	State: TN Zip Code: 37066
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 150. \(\omega\) Date of Contribution: \(\omega \langle 2 \rangle 4 \rangle 4	Aggregate This Election: \$ 150.00
Business or Organization Name: Lov Aug Buildes	OR
First Name: Middle Name:	Last Name:
Address: 120 Laurencerous RD City: GALLATIN	State: TN Zip Code: 37044
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 2/29/24	Aggregate This Election: \$ 100. 6
Total Contributions: \$ 1450. (Carry forward to the next page if additional pages of this form are used. If the amount must be shown in the summary on first page.)	is is the last page of contributions, this

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee N	Name: KATHY STURET	
	Date: 2/25/24 End Date: 3/31/24	
	ons from preceding page (enter \$0 if first page) \$	5 1.450.∞
. •		
COMPLETE THE APPROPRIAT	TE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	to the second
Business or Organization Na		
First Name: Range	Middle Name:	Last Name: Jowes
Address: 503 Beiks	PL City: GALLATIN	State: Tw Zip Code: 37066
	Employer:	
Contribution Received For:	Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$_	00. ∞ Date of Contribution: 2/29/24	Aggregate This Election: \$100. ←
Business or Organization Na	me:	OR
	Middle Name:	
Address: 4453 Hwy	76 City: Cotton on	State: TN Zip Code: \$7048
	Employer:	
Contribution Received For:	Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$_	200. [∞] Date of Contribution: 3/5/24	Aggregate This Election: \$ 200.00
Business or Organization Na	me:	OR
First Name:	Middle Name:	
	City:	
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 Nar	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: \$(Carry forward to the next pamount must be shown in	750 page if additional pages of this form are used. If t the summary on first page.)	his is the last page of contributions, this

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: ν	CATHY STUANT	
2. Reporting Period: Start Date:		131124
3. Total in-kind contributions from pre		
	OR EACH IN-KIND CONTRIBUT	ION. In-kind contributions totaling more than one hundred
Business or Organization Name:		OR
First Name: BEN + AMY	Middle Name:	Last Name: HARRIS
		State: TN Zip Code: 37066
Occupation:		
		eneral Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 250. 6	In-Kind Contribution Date:	2/29/24 Aggregate This Election: \$ 250. 00
		PARTY
Business or Organization Name:		OR
		Last Name: Overtow
•		State: TN Zip Code: 37064
Occupation:		
		eneral Election Runoff (Local Elections Only)
		2/29/24 Aggregate This Election: \$ 250. 6
	0	
Description of In-Kind Contribution:	CAMPAIGN KICKOFF	PARTY
Business or Organization Name:		OR
		Last Name:
Address:	City:	State: Zip Code:
Occupation:	Employer:	
In-Kind Contribution Received For:	Primary Election G	eneral Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$	_ In-Kind Contribution Date:	Aggregate This Election: \$
Description of In-Kind Contribution:	- 1	
Business or Organization Name:		OR
		Last Name:
		State: Zip Code:
		. 14
		eneral Election Runoff (Local Elections Only)
		Aggregate This Election: \$
Total In-Kind Contributions: \$ 500	∞	
(Carry forward to the next page if add contributions, this amount must be sh	itional pages of this form are u	used. If this is the last page of in-kind
continuations, this afficult must be st	lown in the suitillary of tillst	Jaye.)

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name:	KATHY	STUART					
2. Reporting Period: Start Date:			Date: 3/31/	24			
3. Total campaign expenditures from					. 50		
COMPLETE THE APPROPRIATE ITEM kind contribution to a candidate, please recandidate's name in the purpose of the exp	member to inc	lude the purp	URE. All expend cose of the expend	ditures m diture (e.g	ust be itemized ., postage, printi	. If the expending, etc.) along	diture is an in- with the
Business or Organization Name:	QUALITY	PRINTING	2				OF
First Name:	Mido	lle Name:			Last Name:		
Address: 141 E. Eastland		City:	GALLATIN		State: TN	Zip Code:	37066
Purpose of Expenditure: Y421)	SIUNS						
Amount of Expenditure: \$ 192.	25	_ Date of	Expenditure:	2/20	1/24		
Business or Organization Name:/	MR. SI	on Ma	₩				OF
First Name:							
Address: 129 Commerce S	ST	City: F	ten) 6750 mm	16	State: TN	Zip Code:	37075
Purpose of Expenditure: Campa	10~	PATERIAL !					
Amount of Expenditure: \$ 196.6				3/5/	24		
Business or Organization Name:	FIRST	HORIZON	BANK				OF
First Name:							
Address: 668 NASHVILLE F	rke	City:	GALLATIN		State: TN	Zip Code:	37066
Purpose of Expenditure: Misceu				T d			
Amount of Expenditure: \$ 32.65		_ Date of	Expenditure:	abs/	24 - 3/31/3	24	
Business or Organization Name:							OR
First Name:	Midd	le Name:			Last Name:		
Address:		City:			State:	Zip Code:	
Purpose of Expenditure:				15.			
Amount of Expenditure: \$		_ Date of	Expenditure:				
Business or Organization Name:							OR
First Name:							
Address:							
Purpose of Expenditure:							
Amount of Expenditure: \$							
Total Expenditures: \$ 421.53 (Carry forward to the next page if ac amount must be shown in the sumr	dditional pag	ges of this f	form are used.	If this is	the last page	of expendit	ures, this

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Karan	STUNIET				9	
2. Reporting Period: Start Date: 2/25/3		Date: 3/31	124			,
3. Complete the appropriate items for ea				red dollars (\$100).	
Complete the following for the source of each lo	oan received and/o	or outstanding	during the p	eriod.		
Business or Organization Name:						OR
First Name: KATHY + CHUK N	Aiddle Name:		Lā	st Name:	STUART	_
Address: 1116 B Limera Biza						
Outstanding Loan Balance (Beginning)						
Loans Received		40.00				
Loan Payments						
Outstanding Loan (End)						
Loan Received For: Primary Electio			Runoff	(Local Electi	ons Only)	
Date of Loan: 2/29/24						
List all endorsers or guarantors for above loan (If more space is ne	eeded, please a	ttach additio	onal pages.)		
Business or Organization Name:						OR
First Name:						
Address:	City:		- 52	State:	Zip Code:	
Amount Guaranteed Outstanding: \$						
Business or Organization Name:						OR
First Name:						
Address:						
Amount Guaranteed Outstanding: \$						
Business or Organization Name:						OR
First Name:						
Address:						
Amount Guaranteed Outstanding: \$						
Business or Organization Name:						OR
First Name:						
Address:						
Amount Guaranteed Outstanding: \$,	
Totals for all loans (Complete this page for ea Total loans received and loan payments should be	ch outstanding loa shown on summary	n during the pe y page. Outstan	riod. Comple ding loan bala	te this section o	only on last page of loan shown on front page.)	ıs.
Balance (Beginning)						
Loans Received	\$_	535. ∞				
Loan Payments						
Outstanding Loan (End)						
SS 1122 (Day 1/2022)					8 0	ì

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

Candidate or Committee Name:					
2. Reporting Period: Start Date: End	Date:				
3. Complete the appropriate items for each obligation owe	d to a person/vendor at tl	he end of the r	eporting period	d	
Business Name:	Obligation:				
First Name: Middle Name:		1			
Last Name:		Jane 1			
Address:	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	
State: Zip Code:	\$	\$	\$	\$	
Business Name:	Description of				
First Name: Middle Name:	Obligation:	F. 1			
Last Name:					
Address:	Outstanding Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance	
City:	ć	This Period	\$	(Period End)	
State: Zip Code:		3	3	\$	
Business Name: Middle Name: Last Name:	Obligation:				
Address:	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	
State: Zip Code:	\$	\$	\$	\$	
	بالدادة بالما				
Business Name: Middle Name: Last Name:	Description of Obligation:				
Address:	Outstanding Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance	
City:	Beginning)	This Period	\$	(Period End)	
State: Zip Code:		1	1,	1,	
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	\$	\$	\$	\$	