CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

	1		
1. DATE OF REPORT	2.a. NAME OF CANDIDATE OR		1
4/25/2022	1 Bathy	"Kat" Stu	art
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELE	CTION DATE
4.a. CAMPAIGN ADDRESS AND PHONE			
	City	State Zip Co	nde Phone
Street or Rural Route 1116B Littletm Ranch A	2d Custalian Springs	N 370	ode Phone 31 985-768-6178
1	1	, , , , , , , , ,	3 103 100 0110
4.b. CANDIDATE'S HOME ADDRESS (if differe Street or Rural Route	nt than 4.a.) City	State Zip Co	oda Disas
Subst of Marai Modes	City	State Zip Co	nde Phone
5. OFFICE SOUGHT (include district number,			JRER (may be candidate)
Sunner Worty Commission	er District 6 Lo	ri Am Smil	لنا
7. CATEGORY OR REPORT (Check one)			
FIRST SECOND THIRD	FOURTH PRE-		MID-YEAR YEAR-END
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD		GENERAL SU DATE OF REPORTING P	PPLEMENTAL SUPPLEMENTAL
	o.b. ENDING		-
4/1/2022		4/23/2022	_
9. (Check one)			
a. This campaign is exempt from detai	lod displacure begaves contribution	· (including in block)	
tures total \$1,000 or less for this rep	porting period. (Complete items 12d	s (including in-kind) rece I 12e and 12f \	ived total \$1,000 or less AND expendi-
		•	
b. This campaign is required to file a d	etailed 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 campa	aign financial disclosure	report is true and that this report is an
accurate accounting of campaign contribu-	tions and expenditures required to b	e reported by the candid	late committee by the Campaign
Financial Disclosure Act. Additionally, I/w benefit of the candidate or for any other no	e swear or affirm that no campaign	contributions have been	expended for the personal financial
bender to the carrollage of for any other no	onponical purpose as defined by the	rederal internal revenue	e code.
Path. Chail	4/25/2022	Q . 1 0	, , , , , , , , , , , , , , , , , , ,
Jany Strait	19/0/WC	signature of politica	milin 4/25/2000
signature of candidate	date	signature of political	al treasur é r date
			<u> </u>
11. WITNESS SIGNATURE			
		1	
men Natt	4-25-22	Tim la	4-25-202
signature of witness	date	signature of w	vitness date
		big/idearo by th	narioso date
42 CHMMADY	FILED		
12. SUMMARY		P M	
a. BALANCE ON HAND LAST REPORT	AM	s 4.	403.54 400.00
	APR 2 6 2022	•	
b. TOTAL RECEIPTS THIS PERIOD	AT IN DV	s 21	400. <i>0</i> 0
	SUMNER COUNT	Υ	A week a large
c. TOTAL DISBURSEMENTS THIS PERIOD	SUMPERCOMMIS	SION S_4	184.55
		•	•
d. BALANCE ON HAND (12.a. plus 12.b.	minus 12.c.)		s 2618.99
d. BALANCE ON HAND (12.a. plus 12.b.	•		
a TOTALLOANS OUTSTANDING			1. 2mm
e. TOTAL LOANS OUTSTANDING		***************************************	\$ 0,00
į		· · · · · · · · · · · · · · · · · · ·	<i>(</i>)
f. TOTAL OBLIGATIONS OUTSTANDING			\$
1			



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
Kathy "Kat" Stuart	FROM: 4/1/2422 TO: 4/23/2022
RECEIPTS	1,700,000
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	
b. Itemized Contributions (over \$100 from each source this period)	\$ <i>i,100</i> [®]
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 1	5.b.)
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>/200</u> °
17. INTEREST RECEIVED THIS REPORTING PERIOD	
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	s <u>2400°</u>
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by categ	ory - e.g., printing, postage, gasoline)
Food/Supplies for Events \$ 1	<u>33.38 </u>
\$	
\$	
•	
-	
Ф	
	
\$	
\$	
Total of Expenditures (\$100 or less each payee)	\$ <u>/33.38</u>
b. Itemized Expenditures (Over \$100 each payee this period)	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>4184.05</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>"Ø</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.	\$ <u>4,184.05</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. ar	nd 22.b.) \$ <u>900 ^{&}</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 show	n i item 12.f.)\$

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	: 4 / 1		ERING THE PERIOD
Kothy "P	at "Stuart	FROM: 4/1/2	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FROM PRECEDING PAG	SE (enter \$0 if first itemized page)	Amount 6
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEMIZED CONTRIBUTION (C	contributions totaling more than \$100 from any contribut	or)
First Name MUISSA	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Hompton	·	Primary Election	\$500°
Address 1114B Littleton Ranch	(2d	Runoff (Local Elections Only)	
City Castalian Springs	State Zip Code TN 37031	Date of Contribution	Aggregate This Election
Occupation	10 31031	415/2122	<i>5</i> ∞ ∞
Ketired			
. ,			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Danny - N. K. Last Name/Organization Name		General Election General Election	£ 100.00
Address 749 Plantation	****	Runoff (Local Elections Only)	
civ Gallatin	State Zip Code 37066	Date of Contribution	Aggregate This Election
Occupation Builder	1N 37066	4/23/2022	4.2.2.
Employer D W16UF	4	1	100.00
First Name Ecic	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		✓ Frimary Election	
Address Zach Haad Too Para		Runoff (Local Elections Onty)	# 100.N
City Con Readow Cov	State Zip Code	Date of Contribution	Annanta This Election
Springfield	TN 37172		Aggregate This Election
Owner/Operator		4/23/2022	100.00
Employer			
First Name Chais	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name	<u></u>	Primary Election	d (a n Na
Address 115 Taylor	7 as	Runoff (Local Elections Only)	g/∞ œ
City Handson all	State Zip Code	Date of Contribution	Aggregate This Election
Hendusmulle Occupation 1 - 0	TN 37075	11. 1	33 3
Law Entercement	•	4/23/2022	100.00
		• • •	'
Employer	····	., ,	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	H Slund	2 REPORT COVERI	NG THE PERIOD TO: 4/23/2022
Kathy "Ka			Amount 800 %
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTION		는 (enter \$0 if first itemized page) ontributions totaling more than \$100 from any contributor	
	iddle Name	Contribution Received For:	Amount of Contribution
KICKY Last Name/Organization Name JMES		Primary Election	4100°
Address 5064 Windland Dr		Runoff (Local Elections Only)	
city Spring fulai	State Zip Code 37172	Date of Contribution	Aggregate This Election
Occupation Owner/Operator Employer		4123/2022	100.00
First Name Shawn - Vickii	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Femell		Primary Election	# 100 W
Address 819 Plantation Blue	d	Runoff (Local Elections Only)	
City Gallatin	State Zip Code 3.7044	Date of Contribution	Aggregate This Election
Occupation	10 10 100	4123/2022	100.00
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name TIASUY		☐ Primary Election ☐ General Election	4/00°
Address 142 Riverchase		Runoff (Local Elections Only)	
	State Zip Code 37075	Date of Contribution	Aggregate This Election
Occupation First Vote Employer		4123/2022	100.00
	Middie Name	Contribution Received For:	Amount of Contribution
First Name	yndolo Hallio	Primary Election General Election	
Last Name/Organization Name			
Address		Runoff (Local Elections Only)	
City	State Zip Code	Date of Contribution	Aggregate This Election
Occupation			
Employer		-	
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3, of next page if additional pages)	s of this form are used.) t be shown in item 15b. of summary.)		41,100

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME O	F CANDIDATE OR CO	MMITTEE	,	2	REPORT COVERIN				
	Kathy "	'Kat" 5+	uart		FRUM: L/	TO: 4/2 3 /2:22			
3. TOTAL IT	MINUIN								
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 N	ame	In-Kind Contribution Receiv	ed For: Deneral Election	Value of In-Kind Contribution			
Last Name/Orga	Envir	owerks		Runoff (Local Election	ns Only)	* 900°			
Address	600 Wade (<u>'</u>		Date of In-Kind Contribution 4 Description of In-Kind Contribution Portable R	123/2022	Aggregate this Election			
City	City Goodlettsville State 70 37072			Description of In-Kind Contribution	athrums for a	Event			
Occupation		Employer		-					
First Name		Middle N	lame	In-Kind Contribution Received Primary Election		Value of In-Kind Contribution			
Last Name/Orga	anization Name			Runoff (Local Election					
Address		<u></u>		Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution	1				
Occupation		Employer		- -					
First Name		Middle I	Name	In-Kind Contribution Recei		Value of In-Kind Contribution			
Last Name/Org	anization Name	<u></u>		Runoff (Local Election					
Address				Date of In-Kind Contribution	, Omj	Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation		Employer							
į			,						
First Name	, , , , , , , , , , , , , , , , , , ,	diddle l	Name	In-Kind Contribution Rece		Value of In-Kind Contribution			
Last Name/Org	ganization Name			☐ Primary Election ☐ General Election					
Address				Runoff (Local Election Date of In-Kind Contribution	ons Only)	Aggregate this Election			
	<u> </u>					. Adv adviso tillo minorititi			
City		State	Zip Code	Description of In-Kind Contributio	ח				
Occupation		Employer							
First Name		Middle	Name	In-Kind Contribution Rec	,	Value of In-Kind Contribution			
Last Name/Organization Name			Primary Election						
Address			Runoff (Local Election Date of In-Kind Contribution	ина Опіў)	Aggregate this Election				
City		State	Zip Code	Description of In-Kind Contributio	n				
Occupation		Employer		-		· ·			
1	ITEMIZED IN-KIND COI								
(Carry for (If this is t	ward to item 3, of next page if a the last page of in-kind contribut	oditional pages of this fo ions, this amount must b	orm are used.) De shown in item 22b. of summ	nary.)	<u> </u>				
SC 11	28 (Pay 2/06)		····	D	age 5 of 9	RDA 1159			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	/1 /			2. REPORT COVER	TO 11		
Kathy "Lat":	Huart			FROM: 4/1/2022	TO: 4/25/2072 Amount		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	RES FROM I	PRECEDING PAG	E (enter \$0 if first itemized pa	ge)	Amount		
4. COMPLETE THE APPROPRIATE ITEMS FOR EA					iod)		
First Name	Middle Name	<u> </u>	Purpose of Expenditure	4 .	Amount of Expenditure		
Last Name/Business Name Chick-Fil-A			Food for Mes	++6reet	8 433.51		
Address 706 5 Cumberland S	t		Event				
Cily Lebanm	State	Zip Code 31087	-				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	<u>L</u>			. 0	102.02		
Address 211 Maharris Dr			- Food for fund Event	d Kausing + Swoolus	183.92		
City Gallatin	State 2	7ip Code 37066					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name San's Club Address	. 1		Food for Turn	40402			
301 Indian Lake B	301 Indian Lake Blva						
Hendursmuille	State 7N	Zip Code 37075					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name LA Fresh Seafe	γd			7 492.85			
1			Food for Fur	od Rawing			
Address 1200 5 Mt Juliot 1 City	State	Zip Code	- Even	+	·		
Mt Juliet	TN	37122					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Cop.tol Pomoton	<u></u> 5 Inc				21202		
Address Po Box 231			Giveniua	15 (Fans)	24202		
City Glensia	Stale PA	Zip Code 19038					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			Postage	2	\$1,192		
Address							
Castalian Sorings	State TW	Zip Code 37031					
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional page (If this is the last page of expenditures, this amount mu					32,948.28		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	
				FROM:	TO: Amount
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	JRES FRO	M PRECEDING PAG	E (enter \$0 if first itemized pa	age)	2948.28
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEM	IZED EXPENDITURE (expenditures totaling more than \$100) to any payee during the per	
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Face Um Address	<u> </u>		Food/Suppl	us for Events	218.55
471 East Main 5					
Gallotin	State 770	2ip Code 37066			
First Name	Middle Nar	пе	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			-		
Knows			Food/Suppl	us for Events	443.46
Address 2011 Nashville P.	ke		_		743.46
Gallatin'	State 7N	Zip Code 37066			
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Als Foodland			- 10	(()	
Address 1006 North Cumb	.da al		- Food/Suppl	les for Events	440.38
City Lebann	State	Zip Code	†		
LEDUNIN	TN	37087			
First Name	Middle Nam	e	Purpose of Expenditure	:	Amount of Expenditure
Last Name/Business Name		· · · · · · · · · · · · · · · · · · ·			
Address		···			
City	State	Zip Code	-		
				_	
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			1		
Address		<u></u>			
City	State	Zip Code			
First Name	Middle Nam	e	Purpose of Expenditure	<u>''</u>	Amount of Expenditure
Last Name/Business Name	<u> </u>	1		ļ	
Address					
City	State	Zip Code		:	
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must	of this form a	re used.) item 19b. of summary.)			4050.67

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COM		_		-						NG THE PERIOD
Kathy "k	at " S	Huar	+				FF	ROM: /// <i>zu</i> z	z	10: 4/23/2022
3. COMPLETE THE APPROPRIATI	E ITEMS F	OR EACH IT	EMIZ	ED LOAN (I	oans totaling r	nore than \$100 fr	om any sourc	e during the pe	riod)	
Complete the Following for the Source of	*	···· 1 =		- ··	<u> </u>					
First Name Kathy	Middle Nam	0		Outstanding L (Beginning o	f Period)	Loans Received	Pa	Loan yments	(anding Loan Balance (End of Period)
Last Name/Organization Name Shuarh	1			5,0°	XO 1/2	1,200	<u>- ا</u>	Ø	le	,200 "
Address 1116B Littleton	Ranch	Rd		Loan Receive		☐ General E	lection	Date of Lo	•	
Address 1116B Littleton City Castalian Springs	State TW	Zip Code 37031	1	Runoff (Local Elections	Only)		41	12/20	
		sers or Guara		or Above Loa	,	ce is needed	please attac	h a page)		
First Name		Middle Name	:		First Name				Middle	Varne
Last Name/Organization Name					Last Name/O	ganization Nam	e			
Address					Address					
City		State	Zip C	Code	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guar	anteed Outstand	ing			
First Name		Middle Name	3		First Name Middle Name					
Last Name/Organization Name					Last Name/C	rganization Nam	e			
Address				·	Address		· · · · · · · · · · · · · · · · · · ·			
City		State	Zip (Code	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Gua	anteed Outstand	ding			, , , , , , , , , , , , , , , , , , ,
First Name	****	Middle Name	e		First Name				Middle	e Name
Last Name/Organization Name		<u>'</u>			Last Name/C	rganization Nam	16			
Address					Address					
City		State	Zip	Code	City				State	Zip Code
Amount Guaranteed Outstanding	•	<u> </u>	. !		Amount Gua	ranteed Outstand	ding			
First Name		Middle Nam	e		First Name				Middle	Name
Last Name/Organization Name		.I			Last Name/0	Organization Nan	ne		_L	
Address					Address				<u></u>	
City		State	Zip	Code	City				State	Zip Code
Amount Guaranteed Outstanding	· · · · · · · · · · · · · · · · · · ·			•	Amount Gua	ranteed Outstan	ding		*-	
Totals for all Loans (complete on (Total loans received should also be shown						Loan Balanca ; g of Period)	Loans Receive		oan yments	Outstanding Loan Balanc (End of Period)
(Total loan payments should also be shown (Total outstanding loan balance should also	n in item 20. or	summary page	9.}			00 m	1,200		8	6,200°

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMIT	TEE 🗸 .			2. REPORT COV	ERING THE PER	IOD
3. COMPLETE THE APPROPRIATE ITE OBLIGATION (obligations totaling mor person/vendor at the end of the report	Outstanding Balance (Beginning of Period)	PROM: 4/1/2 Debt Incurred This Period	Payments This Period	0utstanding Balance (End of Period)		
First Name	Middle Na	ame				
Last Name/Business Name						
Address					!	
City	State	Zip Code	 			
Description of Obligation		<u>.l</u>		.1	1	
First Name	Middle N	ame				
Last Name/Business Name				į		
Address						
City	State	Zip Code				
Description of Obligation	<u> </u>			<u>. I</u>	<u></u>	.l
First Name	Middle N	ame				
Last Name/Business Name	<u> </u>					
Address		· · · · · · · · · · · · · · · · · · ·				
City	State	Zip Code				:
Description of Obligation		· !		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
First Name	Middle N	lame				
Last Name/Business Name			-		,	
Address						
City	State	Zip Code				
Description of Obligation		<u> </u>		<u>, I.,,</u>	<u></u>	<u> </u>
First Name	Middle N	lama				
Last Name/Business Name	. 1.					
Address	···					
City	State	Zip Code				
Description of Obligation		<u> </u>		<u>-1</u> .	<u> </u>	
4. TOTALS				Ī		
(Total from Outstanding Balance - (End of F in item 23b. on summary page.)	Period) column m	ust aiso be shown				Ø