

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

Amended

1. DATE OF REPORT <u>Oct 10-12</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Annette Stafford</u>		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>Nov 6, 2012</u>		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>607 C.L. Manier</u> <u>Hebann</u> <u>TN</u> <u>37087</u> <u>6154492473</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>Ward 2 Alderperson</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Ramona Shipman</u>		
7. CATEGORY OR REPORT (Check one)				
<input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input 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>7-1-2012</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>10-10-12</u>		
9. (Check one)				
a. <input checked="" 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 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>Annette Stafford</u> signature of candidate		<u>Jan 14, 13</u> date		<u>Ramona Shipman</u> signature of political treasurer <u>1-16-13</u> date
11. WITNESS SIGNATURE				
<u>Ramona Shipman</u> signature of witness		<u>1-16-13</u> date		<u>Ramona Shipman</u> signature of witness <u>1-16-13</u> date
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT		\$ <u>- 0 -</u>		
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>- 0 -</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>- 0 -</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>- 0 -</u>		
e. TOTAL LOANS OUTSTANDING		\$ <u>- 0 -</u>		
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>- 0 -</u>		



SUMMARY PAGE - CANDIDATE

Amended

13. NAME OF CANDIDATE OR COMMITTEE (In Full)

Annette Stafford

14. REPORT COVERING THE PERIOD

FROM: 7-1-12

TO: 10-10-12

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ - 0 -

b. Itemized Contributions (over \$100 from each source this period) \$ - 0 -

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 350⁰⁰

16. LOANS RECEIVED THIS REPORTING PERIOD \$ - 0 -

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ - 0 -

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 350⁰⁰

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)

Radio Ad - WANT \$ 710⁰⁰

Radio Ad - WANT \$ 135⁰⁰

Jewell Yard Signs \$ 540⁰⁰

US Postal \$ 250⁰⁰

Ward Ag Center \$ 225⁰⁰

Honeybee's Printing \$ 330

Exxon Gas \$ 160⁰⁰

Vista Printing \$ 250⁰⁰

Reggie Ward T-Shirts \$ 100⁰⁰

Total of Expenditures (\$100 or less each payee) \$ 2700⁰⁰

b. Itemized Expenditures (Over \$100 each payee this period) \$

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$

20. LOAN REPAYMENTS MADE THIS PERIOD \$ - 0 -

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 2700⁰⁰

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ - 0 -

b. Itemized in-kind contributions (over \$100 from each source this period) \$ - 0 -

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ - 0 -

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ - 0 -

b. Itemized Obligations Outstanding (Over \$100 each) \$ - 0 -

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ 0



Amended

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <u>Annette Stafford</u>		2. REPORT COVERING THE PERIOD FROM: <u>7-1-12</u> TO: <u>10-10-12</u>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name <u>Fraternal Order of Police</u>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	<u>350.00</u>
Address <u>P.O. Box 2275</u>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <u>Lebanon</u>	State <u>TN</u>	Zip Code <u>37087</u>	Date of Contribution <u>9-14-12</u>
Occupation			Aggregate This Election
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name <u>Trillo + Ramesa Shipman</u>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	<u>\$500.00</u>
Address <u>415 Nathan St</u>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <u>Lebanon</u>	State <u>TN</u>	Zip Code <u>37087</u>	Date of Contribution <u>9-15-2012</u>
Occupation			Aggregate This Election
Employer <u>Merigroup</u>			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name <u>Jerome + Laura Stafford</u>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	<u>\$500.00</u>
Address <u>1231 Murray Ct</u>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <u>Lebanon</u>	State <u>TN</u>	Zip Code <u>37087</u>	Date of Contribution <u>9-15-2012</u>
Occupation			Aggregate This Election
Employer <u>NISSAN</u>			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name <u>Randy + Annette Stafford</u>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	<u>\$850.00</u>
Address <u>607 C.L. Manier</u>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <u>Leb</u>	State <u>TN</u>	Zip Code <u>37087</u>	Date of Contribution <u>9-1-2012</u>
Occupation <u>Realtor</u>			Aggregate This Election
Employer <u>NISSAN</u>			
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.)			<u>\$2700.00</u>



Amended

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM: 7/1/12	TO: 10/01/12
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
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 Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	Value of In-Kind Contribution
Occupation	Employer	Description of In-Kind Contribution			
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	Value of In-Kind Contribution
Occupation	Employer	Description of In-Kind Contribution			
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	Value of In-Kind Contribution
Occupation	Employer	Description of In-Kind Contribution			
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	Value of In-Kind Contribution
Occupation	Employer	Description of In-Kind Contribution			
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	Value of In-Kind Contribution
Occupation	Employer	Description of In-Kind Contribution			
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	Value of In-Kind Contribution
Occupation	Employer	Description of In-Kind Contribution			
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS					
(Carry forward to item 3. of 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 item 22b. of summary.)					

Amended

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Annette Stafford				2. REPORT COVERING THE PERIOD FROM: 7-12 TO: 10-10-12	
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 Radio Announcements	Amount of Expenditure \$710
Last Name/Business Name WANT Radio					
Address Trousedale Ferry					
City Lebanon	State Tn	Zip Code 37087			
First Name WANT		Middle Name		Purpose of Expenditure Radio Announcements	Amount of Expenditure \$135
Last Name/Business Name Radio					
Address Trousedale Ferry					
City Lebanon	State Tn	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure yard signs	Amount of Expenditure \$540
Last Name/Business Name Jewell Signs					
Address 229 W. Lester					
City Leb	State TN	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure Postage	Amount of Expenditure \$250
Last Name/Business Name US Postal					
Address Gay St					
City Lebanon	State TN	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure Labels, flyers post cards paper	Amount of Expenditure \$330
Last Name/Business Name Honeybee's					
Address 301 East High St					
City Leb	State Tn	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure Gas for cars	Amount of Expenditure \$160
Last Name/Business Name Exxon Gas					
Address 231 South					
City Lebanon	State Tn	Zip Code 37087			
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.)					

Amended

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING THE PERIOD FROM: 7/1/12 TO: 10/10/12		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount		
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				
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	
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.)		



ITEMIZED STATEMENT OF LOANS - CANDIDATE

Amended

1. NAME OF CANDIDATE OR COMMITTEE						2. REPORT COVERING THE PERIOD	
						FROM: 7/1/12	TO: 10/10/12
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	
Last Name/Organization Name						Loan Payments	
Address				Loan Received For:		Date of Loan	
City		State	Zip Code	<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
				<input type="checkbox"/> Runoff (Local Elections Only)			
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)							
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
4. Totals for all Loans (complete on last page of itemized loans)							
(Total loans received should also be shown in item 16, on summary page.)				Outstanding Loan Balance (Beginning of Period)			
(Total loan payments should also be shown in item 20, on summary page.)				Loans Received			
(Total outstanding loan balance should also be shown in item 12.e. on front page.)				Loan Payments			
				Outstanding Loan Balance (End of Period)			



Amended

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
				FROM: 7/1/12		TO: 10/10/12	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
4. TOTALS							
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							

