

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

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WILSON COUNTY
ELECTION COMMISSION

1. DATE OF REPORT <u>9/30/2018</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Zabrina Seay</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>Nov 2018</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>430 S. Greenwood Ave Lebanon TN 37087 615-547-4012</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>3rd Ward Alderman 21</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Leah S. Cesternino</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>7-1-18</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>9-30-18</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>Zabrina Seay</u> signature of candidate	<u>9/30/18</u> date
<u>Leah S. Cesternino</u> signature of political treasurer	<u>9/30/18</u> date
11. WITNESS SIGNATURE	
<u>William H. Seay</u> signature of witness	<u>9-30-18</u> date
<u>William H. Seay</u> signature of witness	<u>9-30-18</u> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>0</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>2775.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>1791.50</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>983.50</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>2000.00</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>169.31</u>



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Zabrina Seay			2. REPORT COVERING THE PERIOD FROM: 7/1/18 TO: 9/30/18	
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 Action Awnings + Signs		Yard signs + car magnets		\$ 950.48
Address 105 West High Street				
City Lebanon	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Southeast Impressions		campaign t-shirts		\$ 162.24
Address 114 Leeville Pike				
City Lebanon	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Southeast Impressions		campaign t-shirts		\$ 157.32
Address 114 Leeville Pike				
City Lebanon	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Southeast Impressions		Embroidery + Digitizing		\$ 103.79
Address 114 Leeville Pike				
City Lebanon	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Southeast Impressions		campaign t-shirts		\$ 169.34
Address 114 Leeville Pike				
City Lebanon	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
5. TOTAL ITEMIZED EXPENDITURES				\$ 1543.17
(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 OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<i>Zabrina Seay</i>				FROM: <i>7/1/18</i>		TO: <i>9/30/18</i>	
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			Φ	338.65	169.34	169.31
Last Name/Business Name		<i>Southeast Impressions</i>					
Address		<i>114 LEEVILLE PIKE</i>					
City	State	Zip Code					
<i>Lebanon</i>	<i>TN</i>	<i>37087</i>					
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.)							<i>169.31</i>

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Zabrina Seay</i>				2. REPORT COVERING THE PERIOD					
				FROM: <i>7/1/18</i>		TO: <i>9/30/18</i>			
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 <i>Zabrina</i>		Middle Name <i>Seay</i>		Outstanding Loan Balance (Beginning of Period) <i>0</i>		Loans Received <i>2,000.00</i>	Loan Payments <i>0</i>	Outstanding Loan Balance (End of Period) <i>\$ 2,000.00</i>	
Last Name/Organization Name				Address <i>430 S. Greenwood Ave</i>		Loan Received For:		Date of Loan <i>08/01/2018</i>	
City <i>Lebanon</i>		State <i>TN</i>	Zip Code <i>37087</i>	<input type="checkbox"/> Primary Election		<input checked="" 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					
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)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
(Total loans received should also be shown in item 16, on summary page.)				<i>0</i>		<i>2,000.00</i>	<i>0</i>	<i>2,000.00</i>	
(Total loan payments should also be shown in item 20, on summary page.)									
(Total outstanding loan balance should also be shown in item 12.e, on front page.)									



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
Zabrinza Seay				FROM: 7/1/18	TO: 9/30/18
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 Leonard		Middle Name		Contribution Received For:	
Last Name/Organization Name Steverson JR.				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 103-B Ten Throw Dr.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Date of Contribution 8/12/2018	
Occupation Retired		Zip Code 37087		Aggregate This Election \$ 50	
Employer				Check # 2498	
First Name Cheryl		Middle Name L.		Contribution Received For:	
Last Name/Organization Name Taylor				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 15 Kyle Rd				<input type="checkbox"/> Runoff (Local Elections Only)	
City Watertown		State TN		Date of Contribution 8/26/18	
Occupation Accountant		Zip Code 37184		Aggregate This Election \$ 30	
Employer Hospitality Consultants Assoc				Check # 3808	
First Name Anthony		Middle Name E		Contribution Received For:	
Last Name/Organization Name HUGHES				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address PO Box 2433				<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Date of Contribution 9/4/18	
Occupation		Zip Code 37088		Aggregate This Election \$ 75	
Employer HUGHES Garbage Disposal				Check 1934	
First Name Shelly		Middle Name J		Contribution Received For:	
Last Name/Organization Name Cooper				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 405 Bluegrass Ct Lebanon TN				<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Date of Contribution 9/5/18	
Occupation Business Analyst		Zip Code 37090		Aggregate This Election \$ 20	
Employer Optum				cash	
5. TOTAL ITEMIZED CONTRIBUTIONS					\$ 175
(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.)					

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Zabrina Seay				2. REPORT COVERING THE PERIOD FROM: 1/1/18 TO: 9/30/18	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				7/1/18	Amount \$ 175
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Ken		Middle Name		Contribution Received For:	
Last Name/Organization Name Nelson JR.		Address 3080 Leville Pike		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Zip Code 37090	
Occupation Realtor		Employer Blackwell Realty + Auction		Date of Contribution	
				Amount of Contribution \$ 500 -	
				Aggregate This Election \$ 675	
First Name Marilyn		Middle Name R.		Contribution Received For:	
Last Name/Organization Name Bryant		Address 126 E. Forrest Ave		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Zip Code 37087	
Occupation		Employer		Date of Contribution 9/29/18	
				Amount of Contribution \$ 100	
				Aggregate This Election \$ 775	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City		State		Zip Code	
Occupation		Employer		Date of Contribution	
				Amount of Contribution \$ 0	
				Aggregate This Election	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City		State		Zip Code	
Occupation		Employer		Date of Contribution	
				Amount of Contribution \$ 0	
				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.)					\$ 775