

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4/10/16</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Kirst Wade</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>8/4/16</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>1126 Campbell Ct. Murfreesboro TN 37130 615-818-1002</u>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>5403 Sherrington Rd Murfreesboro TN 37128 615-818-1002</u>	
5. OFFICE SOUGHT (include district number, if applicable) <u>Murfreesboro City Council</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Ken Halliburton</u>
7. CATEGORY OR REPORT (Check one) <input checked="" type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input 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>1/10/16</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>3-31-16</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. <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <u><i>T. Kent Wade</i></u> signature of candidate <u>4/10/16</u> date </div> <div style="text-align: center;"> <u><i>Ken Halliburton</i></u> signature of political treasurer <u>4/11/16</u> date </div> </div>	
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <u><i>Ken Halliburton</i></u> signature of witness <u>4/10/16</u> date </div> <div style="text-align: center;"> <u><i>Bob Calk</i></u> signature of witness <u>4-11-16</u> date </div> </div>	
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>8426.44</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>2100.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>1365.00</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>9161.44</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>

APR 11 11:15 AM '16



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Kirt Wade</i>				2. REPORT COVERING THE PERIOD FROM: <i>1/16/16</i> TO: <i>3/31/16</i>		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name <i>Fant</i>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <i>Smith</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>200⁰⁰</i>
Address <i>2223 Shannon Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <i>Murfreesboro</i>		State <i>TN</i>	Zip Code <i>37129</i>	Date of Contribution <i>3/31/16</i>		Aggregate This Election <i>200⁰⁰</i>
Occupation <i>Owner of Printing Business</i>						
Employer <i>Self</i>						
First Name <i>Andy</i>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <i>Vickey</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>500⁰⁰</i>
Address <i>5523 St. Ives Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <i>Murfreesboro</i>		State <i>TN</i>	Zip Code <i>37129</i>	Date of Contribution <i>3/31/16</i>		Aggregate This Election <i>500⁰⁰</i>
Occupation <i>Concrete Business Development Mgr</i>						
Employer <i>Trimble's Structures</i>						
First Name <i>Tommy</i>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <i>Smith</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>250⁰⁰</i>
Address <i>710 E. Main St.</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <i>Murfreesboro</i>		State <i>TN</i>	Zip Code <i>37130</i>	Date of Contribution <i>3/31/16</i>		Aggregate This Election <i>250⁰⁰</i>
Occupation <i>Real Estate</i>						
Employer <i>Self</i>						
First Name <i>Gail</i>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <i>Randall</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>150⁰⁰</i>
Address <i>P.O. Box 1202</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <i>SMYRNA</i>		State <i>TN</i>	Zip Code <i>37167</i>	Date of Contribution <i>3/13/16</i>		Aggregate This Election <i>150⁰⁰</i>
Occupation <i>Retired</i>						
Employer						
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.)					<i>1,100⁰⁰</i>	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Krist Wade</i>			2. REPORT COVERING THE PERIOD FROM: <i>1/16/16</i> TO: <i>3/31/16</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>1,100</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name <i>Bill</i>	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution <i>500.00</i>
Last Name/Organization Name <i>JONES</i>		Address <i>2006 Riverview Dr.</i>		Date of Contribution <i>3/7/16</i>
City <i>Murfreesboro</i>	State <i>TN</i>	Zip Code <i>37129</i>	Aggregate This Election <i>500.00</i>	
Occupation <i>Area Vice President</i>		Employer <i>Pinnacle Bank</i>		
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution
Last Name/Organization Name		Address		Date of Contribution
City	State	Zip Code	Aggregate This Election	
Occupation		Employer		
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution
Last Name/Organization Name		Address		Date of Contribution
City	State	Zip Code	Aggregate This Election	
Occupation		Employer		
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution
Last Name/Organization Name		Address		Date of Contribution
City	State	Zip Code	Aggregate This Election	
Occupation		Employer		
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.)				<i>1,600.00</i>

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Kirt Wade</i>		2. REPORT COVERING THE PERIOD FROM: <i>1/16/16</i> TO: <i>3/31/16</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>0</i>
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 <i>Faith Awards / MLK Scholarship Fund</i>		<i>Sponsor of Awards Banquet</i>	<i>500⁰⁰</i>
Address <i>P.O. Box 351382</i>			
City <i>Murfreesboro</i>	State <i>TN</i>		
First Name <i>FANT</i>	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>SMITH</i>		<i>T-shirts</i>	<i>620⁰⁰</i>
Address <i>2223 Shannon Dr.</i>			
City <i>Murfreesboro</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>MAF</i>		<i>Tickets and Ads for program</i>	<i>245⁰⁰</i>
Address <i>P.O. Box 1649</i>			
City <i>Murfreesboro</i>	State <i>TN</i>		
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.)			<i>1365⁰⁰</i>