

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

JUL 28 '16 09:03

1. DATE OF REPORT <u>July 28, 2016</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Rob mitchell</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Rob mitchell Campaign</u>		3. ELECTION DATE <u>August 4, 2016</u>	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route	City	State	Zip Code Phone
<u>3450 Northboro Ct</u>	<u>Murfreesboro</u>	<u>TN</u>	<u>37129 615-426-7373</u>
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route	City	State	Zip Code Phone
<u>(SAME AS ABOVE)</u>			
5. OFFICE SOUGHT (include district number, if applicable) <u>Property Assessor</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Rob mitchell</u>	
7. CATEGORY OR REPORT (Check one)			
<input 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 checked="" type="checkbox"/> PRE-GENERAL	<input type="checkbox"/> MID-YEAR SUPPLEMENTAL	<input type="checkbox"/> YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD <u>July 1, 2016</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>July 25, 2016</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>Rob Mitchell</u> signature of candidate	<u>July 28, 2016</u> date	<u>Rob Mitchell</u> signature of political treasurer	<u>July 28, 2016</u> date
11. WITNESS SIGNATURE			
<u>[Signature]</u> signature of witness	<u>7/28/16</u> date	<u>[Signature]</u> signature of witness	<u>7/28/16</u> date
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	\$ <u>6487.27</u>		
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>400.00</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>0</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>6887.27</u>		
e. TOTAL LOANS OUTSTANDING	\$ <u>6288.04</u>		
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>		

JUL 28 '16 09:03



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD	
	FROM: 7-1-16	TO: 7-25-16

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

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

b. Itemized Contributions (over \$100 from each source this period) \$ 200.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 200.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 200.00

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ ϕ

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 400.00

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)

	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

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

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

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

20. LOAN REPAYMENTS MADE THIS PERIOD \$ ϕ

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

22. IN-KIND CONTRIBUTIONS

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

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

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

23. OBLIGATIONS

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

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

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



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Rob Mitchell Campaign				2. REPORT COVERING THE PERIOD			
				FROM: 7-1-16	TO: 7-25-16		
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		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200⁰⁰	
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of Contribution		Aggregate This Election	
Nashville		TN	37212	7-15-16		200.00	
Occupation							
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
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 Contribution		Aggregate This Election	
Occupation							
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
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 Contribution		Aggregate This Election	
Occupation							
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
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 Contribution		Aggregate This Election	
Occupation							
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS					Amount		
(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.)					200.00		

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Rob Mitchell Campaign	2. REPORT COVERING THE PERIOD	
	FROM: 7-1-16	TO: 7-25-16

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 Rob	Middle Name	Outstanding Loan Balance (Beginning of Period) 6088.04	Loans Received 200.00	Loan Payments 0	Outstanding Loan Balance (End of Period) 6288.04
Last Name/Organization Name mitchell		Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election			Date of Loan 7-25-16
Address 3450 Northboro CT		<input type="checkbox"/> Runoff (Local Elections Only)			
City Middletown	State CT	Zip Code 06457			

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	City	State
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	City	State
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	City	State
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	City	State
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	

4. Totals for all Loans (complete on last page of itemized loans) <small>(Total loans received should also be shown in item 16, on summary page.) (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.)</small>	Outstanding Loan Balance (Beginning of Period) 6088.04	Loans Received 200.00	Loan Payments 0	Outstanding Loan Balance (End of Period) 6288.04
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