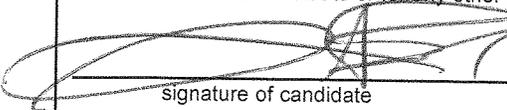
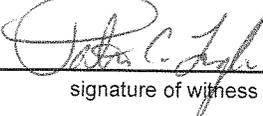


# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>July 28 2016</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Lisa Ann Eischeid</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>N/A</u>		3. ELECTION DATE	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route <u>440 E. Main Street</u>	City <u>Murfreestown TN</u>	State <u>TN</u>	Zip Code <u>39130</u>
Phone <u>615-896-7060</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>General Sessions Judge Dist IV</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Jon Jagues</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		8.b. ENDING DATE OF REPORTING PERIOD	
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.			
 signature of candidate		<u>7/28/16</u> date	
_____		signature of political treasurer	
_____		date	
11. WITNESS SIGNATURE			
 signature of witness		<u>7/28/16</u> date	
_____		signature of witness	
_____		date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT .....	\$	<u>15121.79</u>	
b. TOTAL RECEIPTS THIS PERIOD .....	\$	<u>3350.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD .....	\$	<u>9428.90</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....	\$	<u>9042.89</u>	
e. TOTAL LOANS OUTSTANDING .....	\$	<u>6648.99</u>	
f. TOTAL OBLIGATIONS OUTSTANDING .....	\$	<u>367.61</u>	



## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <i>Lisa Ann Eischerd</i>	14. REPORT COVERING THE PERIOD FROM: <i>7/1/16</i> TO: <i>7/25/16</i>
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### RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

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

b. Itemized Contributions (over \$100 from each source this period) ..... \$ 3250

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ 3350

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.) ..... \$ 3350

### 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)

<u>Contributions / donations</u>	\$	<u>57.00</u>
<u>Food</u>	\$	<u>54.72</u>
<u>Campaign workers</u>	\$	<u>319.00</u>
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____

Total of Expenditures (\$100 or less each payee) ..... \$ 430.72

b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ 8998.18

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ 9428.90

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

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) ..... \$ 9428.90

### 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) ..... \$ 367.61

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) ..... \$ 367.61

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Lisa Ann Eischeid</i>				2. REPORT COVERING THE PERIOD FROM: <i>7/1/16</i> TO: <i>7/25/16</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>John</i>		Middle Name		Contribution Received For:		Amount of Contribution  <i>\$400</i>
Last Name/Organization Name <i>Jones</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <i>1014 Glasgow Drive</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>7/5/16</i>		Aggregate This Election	
Occupation <i>Business Owner</i>		Employer <i>John Jones Realty, LLC</i>				
First Name <i>J.S.</i>		Middle Name		Contribution Received For:		Amount of Contribution  <i>\$400</i>
Last Name/Organization Name <i>Deniel</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City	State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation		Employer <i>None</i>				
First Name <i>Jean Anne</i>		Middle Name		Contribution Received For:		Amount of Contribution  <i>\$250</i>
Last Name/Organization Name <i>Rogers</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <i>226 N. Spring 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>7/19/16</i>		Aggregate This Election	
Occupation <i>Optometrist</i>		Employer <i>Self</i>				
First Name <i>Joy</i>		Middle Name		Contribution Received For:		Amount of Contribution  <i>\$1,000</i>
Last Name/Organization Name <i>Day</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address <i>5141 Virginia Way</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <i>Brentwood</i>	State <i>TN</i>	Zip Code <i>37027</i>	Date of Contribution  <i>7/18/16</i>		Aggregate This Election	
Occupation <i>Attorney</i>		Employer <i>Self</i>				
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.)					Amount <i>\$2,050</i>	

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Lisa Ann Eischeid</i>			2. REPORT COVERING THE PERIOD FROM: <i>7/1/16</i> TO: <i>7/25/16</i>		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>\$2,050</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>John</i>		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name <i>Day</i>		Address <i>5141 Virginia Way</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	<i>\$500</i>
City <i>Brentwood</i>		State <i>TN</i>	Zip Code <i>37027</i>	Date of Contribution <i>7/19/16</i>	Aggregate This Election <i>\$1,500</i>
Occupation <i>Attorney</i>		Employer <i>self</i>			
First Name <i>Joy</i>		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name <i>Day</i>		Address <i>5141 Virginia Way</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	<i>\$500</i>
City <i>Brentwood</i>		State <i>TN</i>	Zip Code <i>37027</i>	Date of Contribution <i>7/19/16</i>	Aggregate This Election <i>\$1,500</i>
Occupation <i>Attorney</i>		Employer <i>self</i>			
First Name <i>Mark</i>		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name <i>Polk</i>		Address <i>107 W. College St.</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	<i>\$200</i>
City <i>Murfreesboro</i>		State <i>TN</i>	Zip Code <i>37130</i>	Date of Contribution <i>7/25/16</i>	Aggregate This Election
Occupation <i>Attorney</i>		Employer <i>self</i>			
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State	Zip Code	Date of Contribution	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>\$3,250</i>	

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Lisa Ann Eischeid</i>				2. REPORT COVERING THE PERIOD FROM: <i>7/1/16</i> TO: <i>7/25/16</i>			
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:		Value of In-Kind 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	
Occupation				Employer		Date of In-Kind Contribution	
Description of In-Kind Contribution						Aggregate this Election	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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	
Occupation				Employer		Date of In-Kind Contribution	
Description of In-Kind Contribution						Aggregate this Election	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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	
Occupation				Employer		Date of In-Kind Contribution	
Description of In-Kind Contribution						Aggregate this Election	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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	
Occupation				Employer		Date of In-Kind Contribution	
Description of In-Kind Contribution						Aggregate this Election	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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	
Occupation				Employer		Date of In-Kind Contribution	
Description of In-Kind Contribution						Aggregate this Election	

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.)



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>USA Ann Eischeid</i>			2. REPORT COVERING THE PERIOD	
			FROM: <i>7-1-16</i>	TO: <i>7-25-16</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>Rockvale Rurikans - Rotary Club</i>		<i>Booth - 4th of July picnic</i>		<i>\$130.00</i>
Address <i>9920 Rockvale Road</i>				
City <i>Rockvale</i>	State <i>TN</i>			
First Name <i>Cynthia</i>	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>Peltier</i>		<i>Fundraising event</i>		<i>\$338.15</i>
Address <i>1314 Shagbark Trail</i>				
City <i>Murfreesboro</i>	State <i>TN</i>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>875 Sign</i>		<i>Signs</i>		<i>\$515.03</i>
Address <i>P.O. Box 11804</i>				
City <i>Murfreesboro</i>	State <i>TN</i>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>B &amp; P Printing</i>		<i>Mail out</i>		<i>\$2,140.74</i>
Address <i>220 W. Noonfield Blvd.</i>				
City <i>Murfreesboro</i>	State <i>TN</i>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>US Postmaster</i>		<i>postage</i>		<i>\$4,205.85</i>
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>Data Management Plus</i>		<i>Mail out</i>		<i>\$980.00</i>
Address <i>1649 Drayton Drive</i>				
City <i>Murfreesboro</i>	State <i>TN</i>			
5. TOTAL ITEMIZED EXPENDITURES				Amount
(Carry forward to item 3. of next page if additional pages of this form are used.)				<i>\$8309.79</i>
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)				

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>USA Ann Eischeid</i>			2. REPORT COVERING THE PERIOD		
			FROM: <i>7-1-16</i>	TO: <i>7-25-16</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>\$8,309.79</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>Asia Management Plus</i>		<i>mail out</i>	<i>\$250.00</i>		
Address <i>1649 Drayton Drive</i>					
City <i>Murreesboro</i>	State <i>TN</i>				Zip Code <i>37130</i>
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name <i>Skwait's Special Events</i>		<i>Event Supplies</i>	<i>\$107.14</i>		
Address <i>939 W. Thompson Lane</i>					
City <i>Murreesboro</i>	State <i>TN</i>				Zip Code <i>37129</i>
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name <i>Oaklands Association</i>		<i>Oaklands July Jamboree tickets</i>	<i>\$150.00</i>		
Address <i>900 North Maney Ave.</i>					
City <i>Murreesboro</i>	State <i>TN</i>				Zip Code <i>37130</i>
First Name <i>John</i>	Middle Name <i>Thomas</i>	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name <i>Leonard.</i>		<i>Campaign Worker</i>	<i>\$181.25</i>		
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			<i>\$8,998.18</i>		
(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

1. NAME OF CANDIDATE OR COMMITTEE <i>Lisa Ann Eischeid</i>				2. REPORT COVERING THE PERIOD FROM: <i>7/1/16</i> TO: <i>7/25/16</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>Lisa</i>		Middle Name <i>Ann</i>		Outstanding Loan Balance (Beginning of Period) <i>\$6,648.99</i>		Loans Received <i>- 0 -</i>	Loan Payments <i>- 0 -</i>	Outstanding Loan Balance (End of Period) <i>\$6,648.99</i>	
Last Name/Organization Name <i>Eischeid</i>				Address <i>440 E. Worn St.</i>		Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Date of Loan <i>4-15-2016</i>	
City <i>Murfreesboro</i>	State <i>TN</i>	Zip Code <i>37130</i>		<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)				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.)									
(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 OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
Lisa Ana Eischeid				FROM: 7/1/16		TO: 7/25/16	
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		\$192.01	N/A	N/A	\$192.01
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name		-0-	N/A	N/A	\$195.60
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				\$192.01	N/A	N/A	\$367.61
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							