



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates

## For Single-Candidate Committees

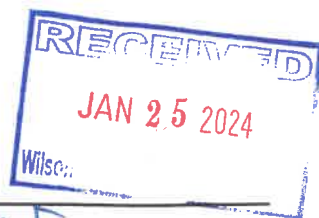
KM 8:00  
RECEIVED  
JAN 25 2024  
Wilson County Election Commission

1. Date: 1/15/24 2.a. Candidate or Committee Name: Committee to elect Jamie Farayn  
2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: 2024  
4. Campaign Address: 1377 Woods Ferry  
City: Lebanon State: TN Zip Code: 37087 Phone: 6154208340  
5. Candidate Home Address: 1377 Woods Ferry  
City: Lebanon State: TN Zip Code: 37087 Phone: 6154208340  
Candidate Email Address: JamieForZone7@gmail.com  
6. Office Sought: (include district number, if applicable) Wilson County School Board Zone 7  
7. Name of Political Treasurer (may be candidate): Jamie Farayn  
Political Treasurer Email Address: JamieForZone7@gmail.com  
8. Category or Report: (check one)  
☐ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General  
☐ Mid-Year Supplemental ☒ Year-End Supplemental  
9. Reporting Period: Start Date: 7-1-23 End Date: 1-15-24  
10. Detailed Disclosure: (Check one)  
☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)  
☐ 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.  
11. 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.  
Candidate Signature Jamie Farayn Date 1/15/24  
Political Treasurer Signature Jamie Farayn Date 1/15/24  
Witness Signature Jamie Union Date 1/15/24  
Witness Signature Jamie Union Date 1/15/24

### 12. Summary:

a. Balance On Hand Last Report .....	\$	<u>0</u>
b. Total Receipts This Period .....	\$	<u>1100.00</u>
c. Total Disbursements This Period .....	\$	<u>667.79</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$	<u>432.21</u>
e. Total Loans Outstanding .....	\$	<u>1000.00</u>
f. Total Obligations Outstanding .....	\$	<u>0</u>

## SUMMARY PAGE - CANDIDATE



13. Name of Candidate or Committee: Committee to elect James Faroukh

14. Reporting Period: Start Date: 7/1/23 End Date: 1/15/24

### 15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 100<sup>00</sup>  
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) ..... \$ 0
- c. Loans Received This Reporting Period ..... \$ 1000<sup>00</sup>
- d. Interest Received This Reporting Period ..... \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... \$ 1100<sup>00</sup>

### 16. Disbursements:

- a. Total Expenditures (other than loan payments) ..... \$ 6667.79  
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period ..... \$ 0
- c. Total Obligation Payments Made This Period ..... \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) ..... \$ 6667.79

### 17. In-Kind Contributions:

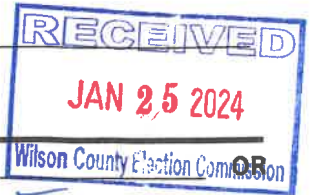
- a. Unitemized In-Kind Contributions Received This Period ..... \$ 0
- b. Itemized In-Kind Contributions Received This Period ..... \$ 0
- c. Total In-Kind Contributions Received This Period ..... \$ 0

### 18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) ..... \$ 0

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Committee to elect Janice Farouh  
2. Reporting Period: Start Date: 7/1/23 End Date: 11/5/24  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \_\_\_\_\_



COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_  
First Name: Janice Middle Name: \_\_\_\_\_ Last Name: Farouh  
Address: 1377 Woods Ferry City: Lebanon State: TN Zip Code: 37087  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 10/23/23 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ \_\_\_\_\_ Date of Contribution: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ \_\_\_\_\_ Date of Contribution: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ \_\_\_\_\_ Date of Contribution: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_

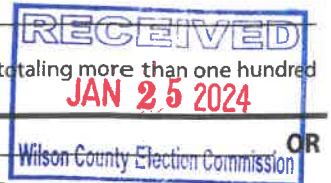
Total Contributions: \$ 100.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Committee to elect Jamie Farough  
2. Reporting Period: Start Date: 7/1/23 End Date: 1/15/24  
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ \_\_\_\_\_

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.



Business or Organization Name: \_\_\_\_\_  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
In-Kind Contribution Value: \$ \_\_\_\_\_ In-Kind Contribution Date: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_  
Description of In-Kind Contribution: \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
In-Kind Contribution Value: \$ \_\_\_\_\_ In-Kind Contribution Date: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_  
Description of In-Kind Contribution: \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
In-Kind Contribution Value: \$ \_\_\_\_\_ In-Kind Contribution Date: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_  
Description of In-Kind Contribution: \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
In-Kind Contribution Value: \$ \_\_\_\_\_ In-Kind Contribution Date: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_  
Description of In-Kind Contribution: \_\_\_\_\_

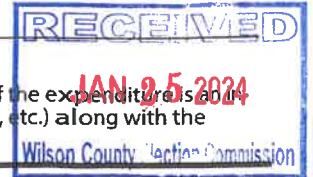
Total In-Kind Contributions: \$ 0  
(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Committee to elect Janice Farough  
2. Reporting Period: Start Date: 7/1/23 End Date: 1/15/24  
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \_\_\_\_\_

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is for a kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.



Business or Organization Name: TN Republican Party OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 95 White Bridge Rd City: Nashville State: TN Zip Code: 37205  
Purpose of Expenditure: Candidate Registration Fee  
Amount of Expenditure: \$ 25.00 Date of Expenditure: \$ 12/07/23

Business or Organization Name: Wilson County Election Commission OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 230 East Gay St. City: Lebanon State: TN Zip Code: 37087  
Purpose of Expenditure: Voter List  
Amount of Expenditure: \$ 38.00 Date of Expenditure: \$ 12/19/23

Business or Organization Name: Premier Sign & Trophy OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1018 McCrary Rd City: Lebanon State: TN Zip Code: 37090  
Purpose of Expenditure: Re-elect stickers  
Amount of Expenditure: \$ 27.44 Date of Expenditure: \$ 12/19/23

Business or Organization Name: Ellis media Solutions OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 11205 Lebanon Rd St 573 City: Mt. Juliet State: TN Zip Code: 37122  
Purpose of Expenditure: Yard signs  
Amount of Expenditure: \$ 488.39 Date of Expenditure: \$ 1/4/24

Business or Organization Name: Ellis media Solutions OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 11205 Lebanon Rd St 573 City: Mt. Juliet State: TN Zip Code: 37122  
Purpose of Expenditure: Paper signs  
Amount of Expenditure: \$ 88.96 Date of Expenditure: \$ 1/14/24

Total Expenditures: \$ 1667.79

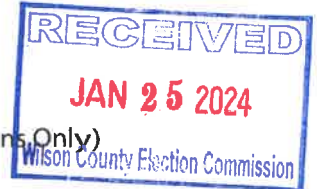
(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

## ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Committee to elect Jamie Farouyn  
2. Reporting Period: Start Date: 7/1/23 End Date: 11/15/24  
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Jamie Middle Name: \_\_\_\_\_ Last Name: Farouyn  
Address: 1377 Woods Ferry City: Lebanon State: TN Zip Code: 37087  
Outstanding Loan Balance (Beginning) ..... \$ 0  
Loans Received ..... \$ 1,000.00  
Loan Payments ..... \$ 0  
Outstanding Loan (End) ..... \$ 1,000.00  
Loan Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
Date of Loan: 12/27/23



List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Jamie Middle Name: \_\_\_\_\_ Last Name: Farouyn  
Address: 1377 Woods Ferry City: Lebanon State: TN Zip Code: 37087  
Amount Guaranteed Outstanding: \$ 1,000.00

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Amount Guaranteed Outstanding: \$ \_\_\_\_\_

**Totals for all loans** (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) ..... \$ 0  
Loans Received ..... \$ 1,000.00  
Loan Payments ..... \$ 0  
Outstanding Loan (End) ..... \$ 1,000.00

# ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Committee to elect Jamie Farough  
 2. Reporting Period: Start Date: 7/1/23 End Date: 11/15/24  
 3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____	<div style="border: 2px solid blue; padding: 5px; text-align: center;"> <b>RECEIVED</b>  <b>JAN 25 2024</b> </div>								
First Name: _____ Middle Name: _____									
Last Name: _____									
Address: _____									
City: _____	<table border="1"> <tr> <th>Outstanding Balance (Period Beginning)</th> <th>Debt Incurred This Period</th> <th>Payments This Period</th> <th>Outstanding Balance (Period End)</th> </tr> <tr> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table>	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$ _____	\$ _____	\$ _____	\$ _____
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)						
\$ _____	\$ _____	\$ _____	\$ _____						
State: _____ Zip Code: _____									

Business Name: _____									
First Name: _____ Middle Name: _____									
Last Name: _____									
Address: _____									
City: _____	<table border="1"> <tr> <th>Outstanding Balance (Period Beginning)</th> <th>Debt Incurred This Period</th> <th>Payments This Period</th> <th>Outstanding Balance (Period End)</th> </tr> <tr> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table>	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$ _____	\$ _____	\$ _____	\$ _____
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)						
\$ _____	\$ _____	\$ _____	\$ _____						
State: _____ Zip Code: _____									

Business Name: _____									
First Name: _____ Middle Name: _____									
Last Name: _____									
Address: _____									
City: _____	<table border="1"> <tr> <th>Outstanding Balance (Period Beginning)</th> <th>Debt Incurred This Period</th> <th>Payments This Period</th> <th>Outstanding Balance (Period End)</th> </tr> <tr> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table>	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$ _____	\$ _____	\$ _____	\$ _____
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)						
\$ _____	\$ _____	\$ _____	\$ _____						
State: _____ Zip Code: _____									

Business Name: _____									
First Name: _____ Middle Name: _____									
Last Name: _____									
Address: _____									
City: _____	<table border="1"> <tr> <th>Outstanding Balance (Period Beginning)</th> <th>Debt Incurred This Period</th> <th>Payments This Period</th> <th>Outstanding Balance (Period End)</th> </tr> <tr> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> </table>	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$ _____	\$ _____	\$ _____	\$ _____
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)						
\$ _____	\$ _____	\$ _____	\$ _____						
State: _____ Zip Code: _____									

TOTALS 0

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>