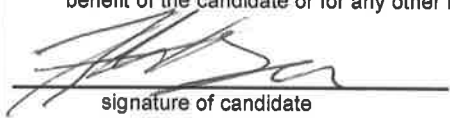
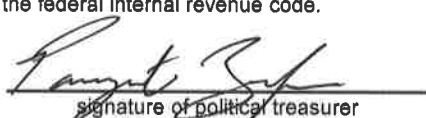
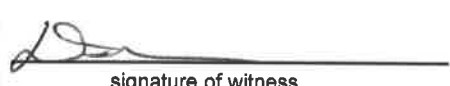
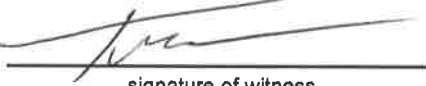


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4/10/2019</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>FLETCHER BURKHARDT</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>N/A</u>		3. ELECTION DATE <u>8/27/2019</u>	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route	City	State	Zip Code Phone
<u>1708 WOOD FIELD CIRCLE</u>	<u>KNOXVILLE</u>	<u>TN</u>	<u>37922 865 337 2288</u>
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route	City	State	Zip Code Phone
<u>4303 THORNWOOD DR</u>	<u>KNOXVILLE</u>	<u>TN</u>	<u>37921 865 337 2288</u>
5. OFFICE SOUGHT (include district number, if applicable) <u>CITY OF KNOXVILLE MAYOR</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>PANAGIOTIS TZEREFOS</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>JANUARY 16 2019</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>MARCH 31 2019</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.			
 signature of candidate		 signature of political treasurer	
<u>4/10/2019</u> date		<u>4/09/19</u> date	
11. WITNESS SIGNATURE			
 signature of witness		 signature of witness	
<u>4/10/2019</u> date		<u>4/10/19</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	\$ <u>-112.04</u>		
b. TOTAL RECEIPTS THIS PERIOD	\$ 4,750.66 <u>2672.66</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 2,211.58 <u>2191.58</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus c.)	\$ <u>369.04</u>		
e. TOTAL LOANS OUTSTANDING	\$ <u>—</u>		
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>464.04</u>		



KNOX CO. ELECTION COMMISSION
APR 10 2019 11:30

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <p style="text-align: center; font-size: 1.2em;">FLETCHER BURKHARDT</p>	14. REPORT COVERING THE PERIOD FROM: <u>1/16/19</u> TO: <u>3/31/19</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 1317.66

b. Itemized Contributions (over \$100 from each source this period) \$ ~~5355.00~~ 2672.66

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ ~~6672.66~~

16. LOANS RECEIVED THIS REPORTING PERIOD \$ —

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ —

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 2672.66

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>SLICK TEXT</u>	\$	<u>98.00</u>
<u>WEBSITE (SQUARE SPACE)</u>	\$	<u>52.00</u>
<u>PAYPAL FEES</u>	\$	<u>70.43</u>
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____

Total of Expenditures (\$100 or less each payee) \$ 220.43

b. Itemized Expenditures (Over \$100 each payee this period) \$ 1971.15

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 2191.58

20. LOAN REPAYMENTS MADE THIS PERIOD \$ —

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 2191.58

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 98.00

b. Itemized in-kind contributions (over \$100 from each source this period) \$ 4024.80

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 4122.80

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 88.64

b. Itemized Obligations Outstanding (Over \$100 each) \$ 375.40

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ 464.04



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE FLETCHER BURKHARDT				2. REPORT COVERING THE PERIOD FROM: 1/16/19 TO: 3/31/19		
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 NICK		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name BRADEN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$ 200
Address 1805 CASCADE FALLS LN				<input type="checkbox"/> Runoff (Local Elections Only)		
City KNOXVILLE		State TN	Zip Code 37931	Date of Contribution 1/28/19		Aggregate This Election
Occupation						\$ 200
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name R & S INSTALLATIONS				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$ 200
Address 4615 FLORENCE RD				<input type="checkbox"/> Runoff (Local Elections Only)		
City KNOXVILLE		State TN	Zip Code 37920	Date of Contribution 2/6/19		Aggregate This Election
Occupation						\$ 200
Employer						
First Name CHRISTOPHER		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name MEREDITH				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$ 500
Address 801 S KING ST				<input type="checkbox"/> Runoff (Local Elections Only)		
City HONOLULU		State HI	Zip Code 96813	Date of Contribution 3/19/19		Aggregate This Election
Occupation						\$ 500
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name THE OUTPOST				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$ 455
Address 109 W ANDERSON AVE				<input type="checkbox"/> Runoff (Local Elections Only)		
City KNOXVILLE		State TN	Zip Code 37917	Date of Contribution 1/28/19		Aggregate This Election
Occupation VENUE						\$ 455
Employer N/A						
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.)					1,355.00	

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE FLETCHER BURKHARDT				2. REPORT COVERING THE PERIOD FROM: 1/16/19 TO: 3/31/19			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0		
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 ALEXANDER		Middle Name		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name BRADEN				<input type="checkbox"/> Runoff (Local Elections Only)		\$ 1500	
Address 2000 E 13TH				Date of In-Kind Contribution 1/20/19		Aggregate this Election \$ 1500	
City AUSTIN		State TX	Zip Code 78702	Description of In-Kind Contribution WEBSITE + DESIGN WORK			
Occupation DESIGNER		Employer SELF-EMPLOYED					
First Name RYAN		Middle Name		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name READ				<input type="checkbox"/> Runoff (Local Elections Only)		\$ 800	
Address 4807 HOLSTON DR.				Date of In-Kind Contribution 1/28/19		Aggregate this Election \$ 800	
City KNOXVILLE		State TN	Zip Code 37914	Description of In-Kind Contribution CAMPAIGN PHOTOGRAPHY			
Occupation PHOTOGRAPHER		Employer READ PICTURE CO.					
First Name GARETT		Middle Name		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name THOMPSON				<input type="checkbox"/> Runoff (Local Elections Only)		\$ 1200	
Address 5474 CALVERT LN				Date of In-Kind Contribution 1/28		Aggregate this Election \$ 1200	
City KNOXVILLE		State TN	Zip Code 37918	Description of In-Kind Contribution VENUE SPACE RENTAL FOR CAMPAIGN KICK OFF			
Occupation VENUE MANAGER PROMOTER		Employer SELF-EMPLOYED					
First Name		Middle Name		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name HOLY LAND MARKET				<input type="checkbox"/> Runoff (Local Elections Only)		\$ 350	
Address 3601 SUTHERLAND AVE				Date of In-Kind Contribution 1/28/19		Aggregate this Election \$ 350	
City KNOXVILLE		State TN	Zip Code 37919	Description of In-Kind Contribution CAMPAIGN KICK OFF FOOD			
Occupation RESTAURANT		Employer N/A					
First Name BUDDY		Middle Name		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name BURKHARDT				<input type="checkbox"/> Runoff (Local Elections Only)		\$ 174.80	
Address 9021 Kirkland way				Date of In-Kind Contribution 3/6/19		Aggregate this Election \$ 174.80	
City KNOXVILLE Powell		State TN	Zip Code 37844	Description of In-Kind Contribution TABLE THROW			
Occupation		Employer KNOX COUNTY SHERIFF DEPT.					
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.)					4,024.80		



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE FLETCHER BURKHARDT			2. REPORT COVERING THE PERIOD	
			FROM: 1/16/19	TO: 3/31/19
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount Ø	
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 RHYTHMPREINTSUPPLY.COM		CAMPAIGN T-SHIRTS		\$ 1815
Address 6525 INDUSTRIAL DR.				
City SACHSE	State TX			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name VISTA PRINT.COM		BUSINESS CARDS + DISTRIBUTABLES		\$ 156.15
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
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.)				

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD					
FLETCHER BURKHARDT				FROM:		TO:			
				1/16/19		3/31/19			
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		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name									
Address				Loan Received For:			Date of Loan		
City				State	Zip Code	<input type="checkbox"/> Primary Election	<input 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		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, on front page.)									



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD				
FLETCHER BURKHARDT			FROM: 1/16/19		TO: 3/31/19		
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 PANAGEOTIS	Middle Name		\$23.40	\$727.00	\$375.00	\$375.40	
Last Name/Business Name TZEREFOS							
Address 1708 WOOD FIELD CIRCLE							
City KNOXVILLE	State TN						Zip Code 37922
Description of Obligation TSHARE + WEBSITE COSTS							
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.)			\$23.40	\$727.00	\$375.00	\$375.40	