CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For Multicandidate Committees (PACs)

1. DATE OF REPORT 7-5-17	2. NAME OF COMMITTEE CITIZENS FOR A CIVIL CAMMUNITY
2.A. SHORT NAME OF COMMITTEE (IF APPLIC	CABLE)
3. ADDRESS AND PHONE Street or Rural Route 48 WYNOER MERE	City State Zip Code Phone HENDERS WILL TO 37070 615-584. Z600
4. TYPE OF CANDIDATES SUPPORTED	STATE PUBLIC OFFICE DECAL PUBLIC OFFICE BOTH
5.A. NAME OF POLITICAL TREASURER CHARUS KIMM 6. CATEGORY OR REPORT (Check one)	ROUGH, SR. 5.B. DATE APPOINTED 4.2-14
FIRST SECOND THIRD QUARTER QUARTER QUARTER 7.A.BEGINNING DATE OF REPORTING PERIOD	FOURTH PRE- PRE- MID-YEAR YEAR-END QUARTER PRIMARY GENERAL SUPPLEMENTAL SUPPLEMENTAL 7.B.ENDING DATE OF REPORTING PERIOD
JANUARY 16, 20	
expenditures total \$1,000 or less for t	ed disclosures because contributions (including in-kind) received total \$1,000 or less AND this reporting period. I do solemly swear or affirm that the information contained in this statement implied with all applicable provisions of the Campaign Financial Disclosure Act. (Items 10d., 10e.
\$1,000 and/or expenditures total more in this statement is true and that the frequired to be reported by political call	etailed financial disclosure because contributions (including in-kind) received total more than e than \$1,000 for this reporting period. I do solemly swear or affirm that the information contained following page(s) are a complete and accurate accounting of all contributions and expenditures impaign committees by the Campaign Financial Disclosure Act.
AM. P.M.	signature of political treasures 7 · 5 · 17
JUL 66 2017 9. WITNESS SIGNATURE SUMNER COUNTY ELECTION COMMISSION	Odi Kimbroud 7-5-17 signature of witness date
10. SUMMARY	12 87. 00
	<u>482,00</u>
	\$ 100.00
	ninus 10.c.)
e. TOTAL LOANS OUTSTANDING	\$
f. TOTAL OBLIGATIONS OUTSTANDING	\$

ITEMIZED STATEMENT OF EXPENDITURES - PAC

1. NAME OF COMMITTEE						RING THE PERIOD	
CITIZENS FOR A CIVIL COMMUNITY FROM: 1-16-17					TO:6 34 17		
 TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period). If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g. postage, printing) along with the candidate's name in the purpose of expenditure section. 							
FirstName	Middle Na	me	Purpose of Expenditure		•	Amount of Expenditure	
Last Name/Business Name TN REGISTRY OF PLICTION		ANNUAL	ARCISTRAT	in FEZ	(40 00		
Address					Date of Expenditure		
CANASHUILE	State TN	Zip Code				1.25-17	
First Name	Middle Na	me	Purpose of Expenditure			Amount of Expenditure	
Last Name/Business Name							
Address						Date of Expenditure	
City	State	Zip Code					
First Name	Middle Na	me	Purpose of Expenditure	·· · · · · ·		Amount of Expenditure	
Last Name/Business Name							
Address					Date of Expenditure		
City	State	Zip Code					
First Name	Middle Na	me	Purpose of Expenditure			Amount of Expenditure	
Last Name/Business Name							
			_				
Address						Date of Expenditure	
City	State	Zip Code					
First Name	Middle Name		Purpose of Expenditure		· · · · · · · · · · · · · · · · · · ·	Amount of Expenditure	
Last Name/Business Name			-				
Address					Date of Expenditure		
City	State	Zip Code					
First Name	Middle Na	me	Purpose of Expenditure			Amount of Expenditure	
Last Name/Business Name		1					
Address						Date of Expenditure	
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 campaign expenditures, this amount must be shown in item 17b. of summary.)							