

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4/7/18</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Deanne Dewitt</u>												
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>5/1/18 Primary</u>												
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>898 Plantation Blvd</u> <u>Gallatin</u> <u>TN</u> <u>37066</u> <u>6154617150</u>													
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>(Same)</u>													
5. OFFICE SOUGHT (include district number, if applicable) <u>County Commissioner - District 6</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Amanda Williams</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>1/16/18</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>3/31/18</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. <u>Deanne Dewitt</u> <u>4/7/18</u> <u>Amanda Williams</u> <u>4/7/18</u> signature of candidate date signature of political treasurer date													
11. WITNESS SIGNATURE <u>Asuey Helle</u> <u>4/10/18</u> <u>Albert Dewitt</u> <u>4/10/18</u> signature of witness date signature of witness date													
12. SUMMARY <div style="text-align: center; font-weight: bold; font-size: 2em; opacity: 0.5;">FILED</div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. BALANCE ON HAND LAST REPORT</td> <td style="text-align: right;">\$ <u>0.00 (N/A)</u></td> </tr> <tr> <td>b. TOTAL RECEIPTS THIS PERIOD</td> <td style="text-align: right;">\$ <u>3862.00</u></td> </tr> <tr> <td>c. TOTAL DISBURSEMENTS THIS PERIOD</td> <td style="text-align: right;">\$ <u>1419.55</u></td> </tr> <tr> <td>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)</td> <td style="text-align: right;">\$ <u>2442.45</u></td> </tr> <tr> <td>e. TOTAL LOANS OUTSTANDING</td> <td style="text-align: right;">\$ <u>0.00</u></td> </tr> <tr> <td>f. TOTAL OBLIGATIONS OUTSTANDING</td> <td style="text-align: right;">\$ <u>0.00</u></td> </tr> </table>		a. BALANCE ON HAND LAST REPORT	\$ <u>0.00 (N/A)</u>	b. TOTAL RECEIPTS THIS PERIOD	\$ <u>3862.00</u>	c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>1419.55</u>	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>2442.45</u>	e. TOTAL LOANS OUTSTANDING	\$ <u>0.00</u>	f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0.00</u>
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e. TOTAL LOANS OUTSTANDING	\$ <u>0.00</u>												
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0.00</u>												

FILED
A.M. APR 10 2018 P.M.
SUMNER COUNTY
ELECTION COMMISSION



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Deanne Dewitt</i>				2. REPORT COVERING THE PERIOD FROM: <i>1/16/18</i> TO: <i>3/31/18</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>Deanne</i>		Middle Name <i>Marie</i>		Contribution Received For:	
Last Name/Organization Name <i>Dewitt</i>		Address <i>898 Plantation Blvd</i>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City <i>Gallatin</i>		State <i>TN</i>		Zip Code <i>37066</i>	
Occupation <i>volunteer</i>		Employer <i>N/A</i>		Date of Contribution <i>2/2/18 \$50</i> <i>3/15/18 9250</i>	
				Amount of Contribution <i>\$ 300</i>	
				Aggregate This Election <i>\$ 300</i>	
First Name <i>Scott</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Miller</i>		Address <i>1197 Potter Ln</i>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City <i>Gallatin</i>		State <i>TN</i>		Zip Code <i>37066</i>	
Occupation		Employer <i>Dollar General</i>		Date of Contribution <i>3/1/18</i>	
				Amount of Contribution <i>\$500</i>	
				Aggregate This Election <i>\$500</i>	
First Name <i>Dennis</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Cavin</i>		Address <i>1167 Plantation Pass</i>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City <i>Gallatin</i>		State <i>TN</i>		Zip Code <i>37066</i>	
Occupation <i>retired</i>		Employer <i>N/A</i>		Date of Contribution <i>3/1/18</i>	
				Amount of Contribution <i>\$ 250</i>	
				Aggregate This Election <i>\$ 250</i>	
First Name <i>Tammy</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Perkins</i>		Address <i>1191 Plantation Blvd</i>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City <i>Gallatin</i>		State <i>TN</i>		Zip Code <i>37066</i>	
Occupation <i>business owner</i>		Employer <i>Cruisin Sports</i>		Date of Contribution <i>3/20/18</i>	
				Amount of Contribution <i>\$ 1030</i>	
				Aggregate This Election <i>\$ 1030</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.)					<i>\$2080</i>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Deanne Dewitt</i>				2. REPORT COVERING THE PERIOD FROM: <i>1/16/18</i> TO: <i>3/31/18</i>			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$2080		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name <i>Toni</i>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <i>Oppenheimer</i>				<input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$1000	
Address <i>908 John Armfield Ct</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <i>Gallatin</i>		State <i>TN</i>	Zip Code <i>37066</i>	Date of Contribution <i>3/20/18</i>		Aggregate This Election \$1000	
Occupation <i>retired</i>							
Employer <i>N/A</i>							
First Name <i>John</i>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <i>Puryear</i>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$150	
Address <i>1490 Cherokee Rd.</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <i>Gallatin</i>		State <i>TN</i>	Zip Code <i>37066</i>	Date of Contribution <i>3/30/18</i>		Aggregate This Election \$150	
Occupation <i>owner</i>							
Employer <i>Puryear Farms</i>							
First Name <i>Joan</i>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <i>Bruce</i>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$250	
Address <i>1268 Wavecrest Circle</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <i>Gallatin</i>		State <i>TN</i>	Zip Code <i>37066</i>	Date of Contribution <i>3/30/18</i>		Aggregate This Election \$250	
Occupation <i>counselor N/A</i>							
Employer <i>Bab Center</i>							
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 <small>(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.)</small>					\$1400		

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE N/A

1. NAME OF CANDIDATE OR COMMITTEE <i>Deanne Dwyer</i>				2. REPORT COVERING THE PERIOD		
				FROM: <i>1/16/18</i>	TO: <i>3/31/18</i>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>\$0</i>	
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
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address			Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code		Description of In-Kind Contribution	
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address			Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code		Description of In-Kind Contribution	
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address			Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code		Description of In-Kind Contribution	
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address			Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code		Description of In-Kind Contribution	
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address			Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code		Description of In-Kind Contribution	
Occupation		Employer				
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>Dianne Dewitt</i>		2. REPORT COVERING THE PERIOD		
		FROM: <i>1/16/18</i>	TO: <i>3/31/18</i>	
		Amount: <i>\$ 0.00</i>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				
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>Do Dat</i>		<i>Push cards</i>	<i>213.04</i>	
Address				
City	State			Zip Code
City				State
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>Capitol Promotions</i>		<i>Yard Signs</i>	<i>784.00</i>	
Address				
City	State			Zip Code
City				State
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>Vista Print</i>		<i>"Post-it" / self-adhesive notes for door knocking</i>	<i>36.04</i>	
Address				
City	State			Zip Code
City				State
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>Southern Promotion</i>		<i>T-shirts</i>	<i>383.47</i>	
Address				
City	State			Zip Code
<i>Hendersonville</i>	<i>TN</i>			<i>37075</i>
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State			Zip Code
City				State
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State			Zip Code
City				State
5. TOTAL ITEMIZED EXPENDITURES <small>(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.)</small>			<i>1416.55</i>	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

N/A

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna DeWitt</i>					2. REPORT COVERING THE PERIOD FROM: <i>1/16/18</i> TO: <i>3/31/18</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		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: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Date of Loan	
City	State	Zip Code							
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) (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.)					Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

N/A

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
Dannele Dewitt			FROM: 1/16/18	TO: 3/31/18		
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					
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						
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.)						