CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

	Olligic Cu	ididate dollillitte		W174				
1. DATE OF REPORT		ANDIDATE OR COMMITTEE						
10-29-18	Con	nnie Kittrell						
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE							
			11-06-18					
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	State	Zip Code	Phone				
1016 Durham Dr.,	Gallatin,	TN	37066	615-475-0514				
4.b. CANDIDATE'S HOME ADDRESS (if differen Street or Rural Route	t than 4.a.) City	State	Zip Code	Phone				
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME OF POLITICAL		be candidate)				
Gallatin City Recorder 7. CATEGORYOR REPORT (Check one)	· · · · · · · ·	<u>Carolyn Temp</u>	leton					
FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRE- PRIMARY GENERAL	MID-YEAR SUPPLEMENTA	YEAR-END L SUPPLEMENTAL				
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING DATE OF REPOR	RTING PERIOD					
10-01-18 9. (Check one)		10-27-18						
 a. 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. 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 interaction accurate accounting of campaign contribution. Financial Disclosure Act. Additionally, I/we solvenefit of the candidate or for any other none signature of candidate.	ns and expenditure: wear or affirm that	s required to be reported by the no campaign contributions have defined by the federal internal of the campaign contributions.	candidate committe been expended fo	ee by the Campaign				
atricic N. Paul signature of witness	10 20 18 date	Jalucica signatu	me of witness	10/20/18/ date				
12. SUMMARY	 -							
a. BALANCE ON HAND LAST REPORT	<u>_</u>	ILFD	s <u> </u>	_				
TOTAL DESCRIPTO THE DEDUCE	A.M.	P.M.	5 832 00					
b. TOTAL RECEIPTS THIS PERIOD	U(1 20 20 io		_				
c. TOTAL DISBURSEMENTS THIS PERIOD	SUMMI	ED 00	4,275.42	-				
d. BALANCE ON HAND (12.a. plus 12.b. mir	nu FLECTION	LR COUNTY NGOMMISSION		\$ <u>1,556.58</u>				
e. TOTAL LOANS OUTSTANDING				\$_2,757.00				
f. TOTAL OBLIGATIONS OUTSTANDING				\$				

SUMMARY PAGE - CANDIDATE

_								
1	13. NAME OF CANDIDATE OR COMMITTEE (In Full) Connie Kittrell	14. REPORT COVE	RING THE PERIOR					
ļ	RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	FROM:10-01-18	TO: 10-27-18					
	a. Unitemized Contributions (\$100 or less from each source this period)	<u>. 1 525 00</u>						
			•					
ļ	b. Itemized Contributions (over \$100 from each source this period)							
	c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)							
	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.)		\$ 5,832.00					
l	DISBURSEMENTS		<u>-</u>					
1	9. EXPENDITURES (other than loan payments)							
	a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g	., printing, postage, ga	asoline)					
	\$							
	\$	<u> </u>						
	<u> </u>		i					
	<u> </u>	•						
		_						
	\$	_						
	\$	-						
	\$							
	\$							
		_						
	Total of Expenditures (\$100 or less each payee)	;						
b.	Itemized Expenditures (Over \$100 each payee this period)	4,275.42						
C.	TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$	4,275.42					
20	LOAN REPAYMENTS MADE THIS PERIOD	\$						
	TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)							
	.IN-KIND CONTRIBUTIONS							
a.	Unitemized in-kind contributions (\$100 or less from each source this period)\$							
	Itemized in-kind contributions (over \$100 from each source this period)\$		1					
	TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)		0					
	OBLIGATIONS							
a.	Unitemized Obligations Outstanding (\$100 or less each)\$							
	Itemized Obligations Outstanding (Over \$100 each)\$							
	TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.	· 						
_	12. The first of the shown I frem 12.	\$ _						

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD				
Connie Kittrell	FROM10-01-1	18 ^{TO:} 10-27-18					
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU	age)	Amount					
4. COMPLETE THE APPROPRIATE ITEMS FOR	or)						
First Name	Middle Na	ame	Contribution Received For:	Amount of Contribution			
Last Name/Organization Name Holleman Trucking			Primary Election	\$250.00			
Address 256 E. Schell St.	, ·, -	Runoff (Local Election					
City Gallatin	Zip Code 37066	Date of Contribution	Aggregate This Election				
Occupation	TN	, 57000	1				
Businessman Employer		·	10-12-1	8			
First Name	Middle N	ame	Contribution Received For:	Contribution Received For:			
Last Name/Organization Name HMH			Primary Election	General Election			
Address 575 Airport Rd.			Runoff (Local Election	s Only)	\$250.00		
City Gallatin	^{Zip Code} 37066	Date of Contribution	Aggregate This Election				
Occupation	State	37000	-		ĺ		
Businessman		10-12-1					
Employer							
FirstName William	πė	Contribution Received For:		Amount of Contribution			
Last Name/Organization Name			☐ Primary Election ►	İ			
Moore			_				
Address 119 Public Square			Runoff (Local Election	\$200.00			
City Gallatin	State TN	Zip Code 37066	Date of Contribution	Aggregate This Election			
Occupation			10-12-18				
Attorney Employer]				
First Name	Middle Nar	ne e	Contribution Received For:		Amount of Contribution		
Mike				General Election			
Last Name/Organization Name Zinzer			Election Election Election	\$400.00			
Address 914 Emilee Point			Runoff (Local Elections	Ψ400:00			
City Gallatin	YN.	^{Zip Code} 37066	Date of Contribution	Aggregate This Election			
Occupation			10-12-18				
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS							
(Carry forward to item 3. of next page if additional pages (If this is the last page of contributions, this amount must	\$1,100.00						

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING THE PERIOD				
Connie Kittrell	18 ^{TO:} 10-27-18					
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU	Amount \$1,100.00					
4. COMPLETE THE APPROPRIATE ITEMS FOR E			<u> </u>			
	Middle Nar		Contribution Received For:	Amount of Contribution		
Erst Name Shawn/Vicki						
Last Name/Organization Name Fenne11			Primary Election	\$250.00		
Address 819 Plantation Blvd.		Runoff (Local Election				
Gallatain	State TN	^{Zip Code} 37066	Date of Contribution	Aggregate This Election		
Occupation Businessman			10-23-18			
Employer						
First Name	Middle Nar	ne	Contribution Received For:	-	Amount of Contribution	
Last Name/Organization Name			Primary Election	General Election		
Address			Runoff (Local Election	s Only)		
City	State	Zip Code	Date of Contribution	Aggregate This Election		
Occupation			1			
Employer			1	•		
•			ł		į	
First Name	Middle Nam		Contribution Received For:	·	Amount of Contribution	
First Name Last Name/Organization Name	Middle Nam	e		General Election	Amount of Contribution	
	Middle Nam	· ·			Amount of Contribution	
East Name/Organization Name	Middle Nam	e Zip Code	Primary Election		Amount of Contribution Aggregate This Election	
East Name/Organization Name Address			Primary Election			
East Name/Organization Name Address City			Primary Election			
East Name/Organization Name Address City Occupation		Zip Code	Primary Election			
East Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election		Aggregate This Election	
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election	s Only) General Election	Aggregate This Election	
East Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	s Only) General Election	Aggregate This Election	
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election	s Only) General Election	Aggregate This Election Amount of Contribution	
East Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State Middle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election	s Only) General Election	Aggregate This Election Amount of Contribution	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Connie Kittrell		2. REPORT COVE						
- Committe Kittlein	8 ^{TO:} 10-27-18 Amount							
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT			 					
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITEM	IZED EXPENDITURE		to any payee during the pe				
First Name	Middle Na	me:	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Concept One								
Address 210 North Locust St.			Signs	\$1,324.11				
City Gallatin	Zip Code 37066							
First Name	TIÉ	Purpose of Expenditure	Amount of Expenditure					
Last Name/Business Name Busy Bee Printing	<u>.l</u>		1					
Address 334 West Main St.	· ·		Campai	gn Matreial	\$ 345.05			
City Hendersonville	State TN	Zip Code 37075		·				
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Taylor Marketing								
Address 229 Sheridan Cr.			Processi	\$1,164.60				
City Hopkinsville	State KY	Zip Code 42240	Lis					
First Name	e	Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name Postmaster								
Address Post Office			Postage For Election	\$1,091.64				
Hopkinsville State KY 42240								
FirstName Julie	Middle Nam	e	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name Brackenbury			Dogian For Po	at Cond	A 250 00			
Address 171 Hale Ave.	ä		Design For Pos Mailer	\$ 350.00				
City Gallatin	State TN	Zip Code 37066						
First Name	Middle Name		Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name								
Address]		1			
City	State	Zip Code						
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to Item 3. of next page If additional pages (If this is the last page of expenditures, this amount must		•			\$4,275.42			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE							2. REPORT COVERING THE PERIOD					
Connie Kittrell								FROM: TO: 10-01-18 10-27-18)-27-18
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						2,022,00					Outstanding Loan Balance (End of Period)	
Connie					of Period)	Receiv	ea	Payı	nents	(Cito or Lethod)		
Last Name/Organization Name Kittrell						\$2,75	7.00	\$2,75				57.00
Address Loan Recei												
City Gallatin	State TN	Zip Code 3706	6	l — ·	(Local Elections Only)				10-0	01-1	01-18	
į.	ist All Endo	sers or Guara	intors fo	or Above Loa	n (If more spa	ice is neede	d please a	attach	a page)			
First Name		Middle Name)	•	First Name					Middle	Name	
Last Name/Organization Name	-	<u></u>		<u> </u>	Last Name/Or	ganization Na	mê					
Address	-				Address						•	
City	_	State	Zip Co	ode	City		• • • • • • • • • • • • • • • • • • • •			State		Zip Code
Amount Guaranteed Outstanding	_		!		Amount Guara	nteed Outstar	nding					
First Name Middle Name					First Name					Middle	Name	
Last Name/Organization Name				Last Name/Or	ganization Na	me						
Address				Address								
City		State	Zip Co	ode	City State Ztp Code							
Amount Guaranteed Outstanding Amount Guaranteed Outstanding												
First Name		Middle Name			First Name					Middle	e Name	
Last Name/Organization Name		<u> </u>			Last Name/Organization Name							
Address		<u> </u>			Address							
City		State	Zip Co	xde	City State Zip Co						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 Co	xde	City State Zip Code					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.)					Outstanding L (Beginning					tanding 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.)					O		\$,27	2757.00 \$2,757.0				,757.00