

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>10/12/2020</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Kayce Johnson Smith for Alderman</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Kayce Johnson Smith</u>		3. ELECTION DATE <u>11/03/2020</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>210 Neptune dr Hendersonville TN 37075 (615) 714 6955</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone			
5. OFFICE SOUGHT (include district number, if applicable) <u>Alderman Ward 1 Hendersonville</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Lonnie Sadler</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" 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>7/1/20</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>9/30/20</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>Kayce J Smith</u> signature of candidate		<u>Lonnie Sadler</u> signature of political treasurer	
<u>10/12/2020</u> date		<u>10/12/20</u> date	
11. WITNESS SIGNATURE			
<u>[Signature]</u> signature of witness		<u>[Signature]</u> signature of witness	
<u>10/12/20</u> date		<u>10/12/20</u> date	
12. SUMMARY			
FILED			
a. BALANCE ON HAND LAST REPORT	AM	PM	\$ <u>0</u>
b. TOTAL RECEIPTS THIS PERIOD	<u>OCT 13 2020</u>		\$ <u>6955.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	SUMNER COUNTY ELECTION COMMISSION		\$ <u>2969.84</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)			\$ <u>3985.16</u>
e. TOTAL LOANS OUTSTANDING			\$ <u>1,000</u>
f. TOTAL OBLIGATIONS OUTSTANDING			\$ <u>0</u>



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Kayce Johnson-Smith</u>	14. REPORT COVERING THE PERIOD FROM: <u>7/1/20</u> TO: <u>9/30/20</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 3255.00

b. Itemized Contributions (over \$100 from each source this period) \$ 2700.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 5955.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 1,000

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 10955.00

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)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 62.00

b. Itemized Expenditures (Over \$100 each payee this period) \$ 2907.84

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 2969.84

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 2969.84

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 0

b. Itemized in-kind contributions (over \$100 from each source this period) \$ 0

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 0

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Kayce Johnson-Smith				2. REPORT COVERING THE PERIOD FROM: 7/1/20 TO: 9/30/20	
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 Ben		Middle Name		Contribution Received For:	
Last Name/Organization Name Glover				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 5200 Coffee Tree Dr				<input type="checkbox"/> Runoff (Local Elections Only)	
City Raleigh		State NC		Zip Code 27613	
Occupation Owner/Carolina Wealth Stewardship		Employer Self		Date of Contribution 9/1/20	
				Amount of Contribution \$ 500	
				Aggregate This Election \$ 500	
First Name Stephen		Middle Name		Contribution Received For:	
Last Name/Organization Name Daves				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 5107 Idaho Ave				<input type="checkbox"/> Runoff (Local Elections Only)	
City Nashville		State TN		Zip Code 37209	
Occupation President		Employer Ebbtide Holdings		Date of Contribution 8/27/20	
				Amount of Contribution \$ 500	
				Aggregate This Election \$ 500	
First Name Tara		Middle Name		Contribution Received For:	
Last Name/Organization Name Sanders				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 339 Trey Ln				<input type="checkbox"/> Runoff (Local Elections Only)	
City Gallatin		State TN		Zip Code 37066	
Occupation Disability Advocate		Employer Self		Date of Contribution 9/12/20	
				Amount of Contribution \$ 300	
				Aggregate This Election \$ 300	
First Name Beith		Middle Name		Contribution Received For:	
Last Name/Organization Name Dennen				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 135 Saranac Tr				<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville		State TN		Zip Code 37075	
Occupation Attorney		Employer Farris Bobango		Date of Contribution 9/3/20	
				Amount of Contribution \$ 250	
				Aggregate This Election \$ 250	
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.)					\$ 1550.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Kaycee Johnson-Smith				2. REPORT COVERING THE PERIOD FROM: 7/1/20 TO: 9/30/20	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$1550
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Amanda		Middle Name		Contribution Received For:	
Last Name/Organization Name Hite				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 115 Gaston St				<input type="checkbox"/> Runoff (Local Elections Only)	
City Gallatin		State TN		Zip Code 37066	
Occupation President		Date of Contribution 8/24/20		Amount of Contribution \$250	
Employer STR				Aggregate This Election \$250	
First Name Zach		Middle Name		Contribution Received For:	
Last Name/Organization Name Young				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 93 French St.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Goodlettsville		State TN		Zip Code 37022	
Occupation Commissioner		Date of Contribution 9/20/20		Amount of Contribution \$250	
Employer City of Goodlettsville				Aggregate This Election \$250	
First Name Misti		Middle Name		Contribution Received For:	
Last Name/Organization Name Dian				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1018 Gracelawn dr.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Brentwood		State TN		Zip Code 37027	
Occupation Holistic leadership coach		Date of Contribution 9/3/20		Amount of Contribution \$250	
Employer Self				Aggregate This Election \$250	
First Name Ronald		Middle Name		Contribution Received For:	
Last Name/Organization Name Shepard				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1037 E. Main St.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Gallatin		State TN		Zip Code 37066	
Occupation Retired		Date of Contribution 9/20/20		Amount of Contribution \$200	
Employer N/A				Aggregate This Election \$200	
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.)					\$2500

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Kayce Johnson-Smith			2. REPORT COVERING THE PERIOD FROM: 7/1/20 TO: 9/30/20	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 2500
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name Megan	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Schultz		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$ 200
Address 114 Donmond Dr.		<input type="checkbox"/> Runoff (Local Elections Only)		
City Hendersonville	State TN	Zip Code 37075	Date of Contribution 9/29/20	Aggregate This Election \$200
Occupation Neurophysiologist				
Employer Specialty Care				
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				
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				
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>				\$ 2700

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD		
			FROM:	TO:	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount	
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 Postage	Amount of Expenditure \$102.00
Last Name/Business Name USPS					
Address 105 Imperial Blvd					
City Hendersonville		State TN	Zip Code 37075		
First Name		Middle Name			
Last Name/Business Name ASAP Printing		Middle Name		Purpose of Expenditure Printing	Amount of Expenditure \$570.54
Address 110 Imperial Blvd					
City Hendersonville		State TN	Zip Code 37075		
First Name		Middle Name			
Last Name/Business Name Mr. Sign Man		Middle Name			
Address 129 Commerce Dr.		Middle Name		Purpose of Expenditure Printing	Amount of Expenditure \$1909.69
City Hendersonville					
State TN		Zip Code 37075			
First Name		Middle Name			
Last Name/Business Name Nation Builder		Middle Name			
Address PO Box 811428		Middle Name		Purpose of Expenditure Web Fees	Amount of Expenditure \$277.61
City Los Angeles					
State CA		Zip Code 90081			
First Name		Middle Name			
Last Name/Business Name Memories by Murray		Middle Name			
Address 106 Dalton Cr		Middle Name		Purpose of Expenditure Photos	Amount of Expenditure \$150.00
City Hendersonville					
State TN		Zip Code 37075			
First Name		Middle Name			
Last Name/Business Name		Middle Name			
Address		Middle Name		Purpose of Expenditure	Amount of Expenditure
City					
State		Zip Code			
First Name		Middle Name			
Last Name/Business Name		Middle Name			
5. TOTAL ITEMIZED EXPENDITURES				\$2969.84	
(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 Kauce Johnson-Smith				2. REPORT COVERING THE PERIOD FROM: 7/1/20 TO: 9/30/20											
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 Kauce		Middle Name Johnson		Outstanding Loan Balance (Beginning of Period) 0		Loans Received \$1,000	Loan Payments 0	Outstanding Loan Balance (End of Period) \$1,000							
Last Name/Organization Name Smith				Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)				Date of Loan 8/12/20							
Address 210 Neptune dr				City Hendersonville TN				State TN		Zip Code 37075					
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							
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) 0				Loans Received \$1,000		Loan Payments 0		Outstanding Loan Balance (End of Period) \$1,000							

