## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

For Multicandidate Committees (PACs)

1. DATE OF REPORT	2. NAME OF COMMITTEE Summer County Democratic Party					
7-28-22  2.A. SHORT NAME OF COMMITTEE (IF APPLI	CARLE)	ity beinocrane	furty			
The original of Committee (ii /// E)	ONDEE,		}			
ADDRESS AND PHONE     Street or Rural Route	City	Ctata 7ia Cada	Dhara			
and Roll SI	Gallatin	TN Zip Code 37066	Phone (1)			
4. TYPE OF CANDIDATES SUPPORTED	Danann	110 21000	(615)442-655			
	STATE PUBLIC OFFICE	LOCAL PUBLIC OFFICE	вотн 😿			
5.A. NAME OF POLITICAL TREASURER	**************************************		ATE APPOINTED			
Rebecca Mills	Š	&	-14-22			
6. CATEGORY OR REPORT (Check one)  FIRST SECOND THIRD  QUARTER QUARTER QUARTER	FOURTH (E-	RE- MID-YEAR GENERAL SUPPLEMENTA	YEAR-END L SUPPLEMENTAL			
7.A.BEGINNING DATE OF REPORTING PERIOD  7 - 1 - 2 -		SDATE OF REPORTING PERIOD $7 - 25 - 22$	SOFFEEIVILINIAL			
8. (Check one)		1-01-00				
A. This committee is exempt from detail expenditures total \$1,000 or less for is true and that the committee has coand 10f must also be completed.)	this reporting period. I do solemly s	wear or affirm that the information of	contained in this statement			
B. This committee 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. I do solemly swear or affirm that the information contained in this statement is true and that the following page(s) are a complete and accurate accounting of all contributions and expenditures required to be reported by political campaign committees by the Campaign Financial Disclosure Act.						
-	Revecta signature of p	<u>A Mulls</u>	7-28-22 date			
9. WITNESS SIGNATURE	. 1					
	M/M/signatur	e of witness	7-28-22 date			
10. SUMMARY						
a. BALANCE ON HAND LAST REPORT		s <u>7, 307.1</u>	<u> </u>			
BALANCE ON HAND LAST REPORT      TOTAL RECEIPTS THIS PERIOD		ss	<u> </u>			
c. TOTAL DISBURSEMENTS THIS PERIOD	FILED	s <u>1,301.2</u>	3			
d. BALANCE ON HAND (10.a. plus 10.b. r	minus 40.c.)		s 6,521.96			
e. TOTAL LOANS OUTSTANDING	JUL: 2 8 2022		Ø			
f. TOTAL OBLIGATIONS OUTSTANDING	SUMNER COUNTY ELECTION COMMISSION	ı	. \$			

## **SUMMARY PAGE - PAC**

11. NAME OF COMMITTEE (In Full)	12. REPORT COVE	RING THE PERIOD
Sumner County Democratic Party	FROM 7-1-22	то: 1-25-22
RECEIPTS 13. CONTRIBUTIONS (other than loans and interest)		
a. Unitemized Contributions (\$100 or less from each source this period)	s 5/6.00	<del></del>
b. Itemized Contributions (over \$100 from each source this period)	\$Ø	_
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)		\$ 516,00
14. LOANS RECEIVED THIS REPORTING PERIOD		Cock
15. INTEREST RECEIVED THIS REPORTING PERIOD	•	\$Ø
16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.)		\$ 516.00
DISBURSEMENTS		i
17. EXPENDITURES (other than loan payments)		
a. Unitemized Expenditures (\$100 or less each payee this period) (must be listed by	y category - e.g., print	ing, postage,
gasoline)		
Utilities \$ 78.1	<del>04</del>	
Actique les \$ 19.0.	<b>⊄</b>	
	<u>o_</u>	
\$	<del></del> -	
\$	<del></del>	
Total of Expenditures (\$100 or less each payee)	s 195.12	
b. Itemized Expenditures (Over \$100 each payee this period)	s <u>[<b>3</b>07. 23</u>	<u> </u>
c. Independent Expenditures	\$	
d. TOTAL EXPENDITURES (other than loan repayments)(add 17.a., 17.b. and 17.c.)		\$ 1,496.35
18. LOAN REPAYMENTS MADE THIS PERIOD		\$
19. TOTAL DISBURSEMENTS (add 17.d. and 18.) (must be shown in item 10.c.)		· //
20. IN-KIND CONTRIBUTIONS		-
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <b>Ø</b>	_
b. Itemized in-kind contributions (over \$100 from each source this period)	\$Ø	_
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.	)	\$
21. LOANS		~
LOANS OUTSTANDING (must be shown in item 10.e.)		\$
22. OBLIGATIONS	d	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ <u> </u>	- Ì
b. Itemized Obligations Outstanding (Over \$100 each)	\$	- <i>K</i>
c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown i item	n 10.f.)	\$ <b>P</b> ]

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## ITEMIZED STATEMENT OF EXPENDITURES - PAC

NAME OF COMMITTEE     2. REPORT COV					
Summer County Demo Crats FROM:7-1-2			FROM:7-1-22 TO: 7-25-22		
Amount					
<ol> <li>TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)</li> <li>COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period). If the ex-</li> </ol>					
penditure 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.					
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name			\$750 04		
Last Namer Business Name Facebook Address  1 Hacker Way		Advertising	\$250.0b		
			Date of Expenditure		
Mento Park	State CA Zip 8944205		7-18-22		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name	. L <sub></sub>		\$250.00		
Factbook Address		Advertising	Date of Expenditure		
Address 1 Hacker way					
Mento Park	State Zip Code		7-25-22		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name		Cottes for the	ampaign \$107.17		
Black Press Coffee Shop		Coffee for Co	anifoldin 10 11.1		
Address 106 Public Square		KURIT			
Gallatin	State Zip Code 37066		7-25-22		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name		1	Callina		
Auto owners Insurance		Property + liab	ility 694.00		
Address PO BOX		Property + liab	Date of Expenditure		
Carthage	TN 3030-001		7-7-22		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name	<u> </u>	1			
Address			Date of Expenditure		
			bate of Experiority		
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				
5. TOTAL ITEMIZED EXPENDITURES					
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.)					
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