

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 7/8/22	2.a. NAME OF CANDIDATE OR COMMITTEE Jimmy Overton
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE 5/3/22
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 401 Lakeview Ct. Gallatin TN 37066 615604-7792	
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) County Commissioner Dist 9	6. NAME OF POLITICAL TREASURER (may be candidate) Teresa Overton
7. CATEGORY OF REPORT (Check one)	
<input type="checkbox"/> FIRST QUARTER <input checked="" 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 4-23-22	8.b. ENDING DATE OF REPORTING PERIOD 6-30-22
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.	
signature of candidate Wanda Stephens	date 7/8/22
signature of political treasurer Teresa Overton	date 7/8/22
11. WITNESS SIGNATURE Wanda Stephens	date 7/8/22
signature of witness	date
signature of witness	date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ 58.19
b. TOTAL RECEIPTS THIS PERIOD	\$ 1950.00
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 2021.17
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ -12.98
FILED	
JUL 08 2022	
e. TOTAL LOANS OUTSTANDING	\$ 0
SUMNER COUNTY	
ELECTION COMMISSION	
f. TOTAL OBLIGATIONS OUTSTANDING	\$ 0



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="font-size: 1.2em; font-family: cursive;">Jimmy Overton</div>	14. REPORT COVERING THE PERIOD FROM: <u>4/23/22</u> TO: <u>6/30/22</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>200.00</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>1750.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>1950.00</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>1950.00</u>
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)	
<u>Gas</u>	\$ <u>100.00</u>
<u>Gas</u>	\$ <u>27.02</u>
<u>Campaign Expense</u>	\$ <u>75.00</u>
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>202.02</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>1819.15</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>2021.17</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>0</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>2021.17</u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ _____
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ _____
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>0</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ _____
b. Itemized Obligations Outstanding (Over \$100 each)	\$ _____
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jimmy Overton		2. REPORT COVERING THE PERIOD FROM 4/23/22 TO 6/30/22	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For:	
Address		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		<input type="checkbox"/> Runoff (Local Elections Only)	
State		Amount of Contribution	
Zip Code		Date of Contribution	
Occupation		Aggregate This Election	
Employer			
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For:	
Address		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		<input type="checkbox"/> Runoff (Local Elections Only)	
State		Amount of Contribution	
Zip Code		Date of Contribution	
Occupation		Aggregate This Election	
Employer			
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For:	
Address		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		<input type="checkbox"/> Runoff (Local Elections Only)	
State		Amount of Contribution	
Zip Code		Date of Contribution	
Occupation		Aggregate This Election	
Employer			
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For:	
Address		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		<input type="checkbox"/> Runoff (Local Elections Only)	
State		Amount of Contribution	
Zip Code		Date of Contribution	
Occupation		Aggregate This Election	
Employer			
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For:	
Address		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		<input type="checkbox"/> Runoff (Local Elections Only)	
State		Amount of Contribution	
Zip Code		Date of Contribution	
Occupation		Aggregate This Election	
Employer			
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.)			\$1750 ⁰⁰

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jimmy Overton			2. REPORT COVERING THE PERIOD FROM: 4/23/22 TO: 6/30/22	
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		Amount of Expenditure
Last Name/Business Name Garcias		Post Election Gathering		293.62
Address 971 Memory Lane				
City Gallatin	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name USPS		Mail Out		\$1200.00
Address 380 Maple St.				
City Gallatin	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name 4N Print		Campaign Material		\$25.53
Address 101 Commerce St				
City OshKosh	State WI			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
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 expenditures, this amount must be shown in item 19b. of summary.)				\$1819.15