## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT   2	a. NAME OF CANDIDATE OR C	OS AN AFTER	
10/4/2022	1 1		
2.b. IF COMMITTEE, NAME OF CANDIDATE	Hacy Sorann	uson	West and the second sec
		3. ELECTION I	
4.a. CAMPAIGN ADDRESS AND PHONE	William Committee on the Committee of th	11/08/	32-
Street or Rural Route Ci	ty	State Zip Code	Phono
242 W. Main-St # 279	lendersoni le	TN 37075	Phone / Company
4.b. CANDIDATE'S HOME ADDRESS (if different the	an 4.a.)	10 31015	(202) 1.334 - 254
Street or Rural Route Ci		State Zip Code	Phone
103 Inverness Ct. Her	dersonville 7	71 37075	1205/024-55-91
5. OFFICE SOUGHT (include district number, if ap	The same of the sa	OF POLITICAL TREASURER (ma	av be candidate)
Alderman Wourd 4		thele Owens	ay 20 oarialaato)
7. CATEGORY OR REPORT (Check one)		reve over 15	AND THE RESERVE OF THE PROPERTY OF THE PROPERT
FIRST SECOND THEN			П
QUARTER QUARTER QUARTER	FOURTH PRE- QUARTER PRIMARY	PRE- MID-YEAI GENERAL SUPPLEMEN	, , , ,
8.a. BEGINNING DATE OF REPORTING PERIOD	The second secon	DATE OF REPORTING PERIOD	NTAL SUPPLEMENTAL
8/11/2022	Q1:	30/2022	
9. (Check one)	1	wither	
a. This campaign is exempt from detailed di	colocura hacausa contributi	P. C. P. C. 73 32	
<ul> <li>a. This campaign is exempt from detailed ditures total \$1,000 or less for this reporting</li> </ul>	period. (Complete items 12d	(including in-kind) received total	\$1,000 or less AND expendi-
= /			
<ul> <li>b. This campaign is required to file a detaile and/or expenditures total more than \$1,00</li> </ul>	d financial disclosure because c 20 for this reporting period	contributions (including in-kind) re	eceived total more than \$1,000
	To tel time reporting period.		
I/we do solemnly swear or affirm that the inform     accurate accounting of campaign contributions	nation contained in this compain	on financial dist	
- Mariola Disclosure Act. Additionally live Swe	al Di allim inai no campaign ce	in tribustion of house to the	for the personal financial
benefit of the candidate or for any other nonpoli	ical purpose as defined by the	ederal internal revenue dode.	
Trace (somman)	Nulana	I III WINDS ALL	NX.
signature of candidate	date	signature of political freasure	10/6/2022
		o signature or political treasure	date
11. WITNESS SIGNATURE		A	
Mac A Doga Char	/	11 / mad	
CITY (MILLE) O RELIGIT	10/6/2002	an selled a rell	101 10/10-0
signature of witness	date	signature of witness	196/2022
		Signature of Williess	date
12. SUMMARY			
DALANCE CALLED			
a. BALANCE ON HAND LAST REPORT		\$	
b. TOTAL RECEIPTS THIS PERIOD		5200	-
b. TOTAL RECEIPTS THIS PERIOD		\$ 2,20	N1
c. TOTAL DISBURSEMENTS THIS PERIOD		4313	<u>14</u>
	EUED		
d. BALANCE ON HAND (12.a. plus 12.b. minus	12.c.) FILED	M	s 98676
	AM		A
e. TOTAL LOANS OUTSTANDING	A 03 2022		. 0
	<b>A</b> H00		Ψ
f. TOTAL OBLIGATIONS OUTSTANDING	SUMNER COUNTY	NI	0
f. TOTAL OBLIGATIONS OUTSTANDING	ELECTION COMMISSION	P4	\$



#### SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
Tracy bhanneson	FROM8/1/22 TO: 9/30/22
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	.\$ 190000
b. Itemized Contributions (over \$100 from each source this period)	s3+00°0
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	(8)
16. LOANS RECEIVED THIS REPORTING PERIOD	s_ <del>-</del>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <del>0</del>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>5,300</u> 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)
tostage \$ 1200	
Cheak Printing \$ 2995	
\$	
\$	
\$	
\$	
•	
	_
Total of Expenditures (\$100 or less each payee)	\$ 4195
b. Itemized Expenditures (Over \$100 each payee this period)	s 427129
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 4313 24
20. LOAN REPAYMENTS MADE THIS PERIOD	. 0
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 431324
22.IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	.s 99°00
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.)	\$ 9900
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 i item	12.f.)

## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2 REPORT COVE	RING THE PERIOD
Wacy Johanne St	n		FROM: (127	TO: 9/20/20
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU	TIONS FROM PRECEDING PAGE	GE (enter \$0 if first itemized o	- CITER	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEMIZED CONTRIBUTION (	contributions totaling more than 9	\$100 from any contribute	
First Name	Middle Name	Contribution Received For:	troo nom any commonto	Amount of Contribution
Sandra			/	
Last Name/Organization Name CaskenS		Primary Election	Seneral Election	9200
	e	Runoff (Local Election	ns Only)	
City Gallatin	State Zip Code 37066	Date of Contribution		Aggregate This Election
Lomemaker		8/11/22		A200
Employer		giller		
NA	ASSAULT NAMES DESCRIPTION OF THE OWNER, AND ASSAULT OF THE OWNER, AND			
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Primary Election	General Election	3
Address 120 Governors Pain	+ Blud.	Runoff (Local Election	ns Only)	350
City Hendersonnilk	State Zin Code 37075	Date of Contribution		Aggregate This Election
Occupation	1 10,0,0	8/12/2	<b>-</b>	4
Summer Co. Scha	of Board.	0/10/00		\$
5011	20			430
First Name	Middle Name	Contribution Received For:	many limited and the second se	Amount of Contribution
Last Name/Organization Name	L	Primary Election	General Election	\$150
Address Co. Cl. C. Cl. C.		Runoff (Local Elections	s Only)	4150
103 Canter berry in	State Zip Code	Date of Contribution	2029	
Henderson le	TN 37075	Date of Coliniousion	â	Aggregate This Election
Attorney		8 15 22	2	\$150
Bone Law				
Eiret Name	Middle Name	Contribution Received For:		Amount of Contribution
Laet Neme/Organization Name +CUNL		☐ Primary Election	General Election	\$
Address 95 Hunt Club B	shoot -	☐ Runoff (Local Elections	s Only)	200
City Gallatin	State Zip Code 370 Cole	Date of Contribution		Aggregate This Election
Occupation Retired.	10131000	8/15/2	12	\$
Employer NIA				200
	The contract of the Asian Section 1999			No. Carlos No. and No. and No. and No.
<ol> <li>TOTAL ITEMIZED CONTRIBUTIONS         (Carry forward to item 3. of next page if additional pages of (If this is the last page of contributions, this amount must be accounted.)     </li> </ol>	f this form are used.)			\$800
The second secon	e shown in item 150, of summary.)		i	

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTE			2 000000000	The second secon
Tracy Johann	18300		2. REPORT COVER	TO9/20/22
3. TOTAL ITEMIZED CAMPAIGN CONTRIE	BUTIONS FROM PRECEDING PA	AGE (enter \$0 if first itemized a		Amount
COMPLETE THE APPROPRIATE ITEMS FOR  First Name	R EACH ITEMIZED CONTRIBUTION	(contributions totaling more than	\$100 from any contributor	14500
First Name	Middle Name	Contribution Received For:	Continuity Continuitor	Amount of Contribution
Last Name/Organization Name		J Прин. г	4	Amount of Contribution
Tumer		Primary Election	General Election	\$
127 Natchez D	r.	Runoff (Local Election	ns Only)	200
Hendersonnille	State Zip Code 37075	Date of Contribution		Aggregate This Election
Occupation Consultant		8/25/22		\$200
Employer Tremer Doycks	Advisors			300
First Name Ken	Middle Name	Contribution Received For		Amount of Contribution
Last Name/Organization Name			General Election	
Address		Runoff (Local Election		\$1000
110 The Landing	State Zip Code	Date of Contribution	s Only)	
Occupation_	TN 37075	+		Aggregate This Election
Employer Reticed		8/29/22		\$1000
Ketired				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
First Name	Middle Name	Contribution Received For:	ALL THE SHEET AND THE SHEET WAS A SHEET OF	Amount of Contribution
Last Name Organization Name		Primary Election	General Election	\$200
Address Merrimac D	<i>C</i> :	Runoff (Local Elections	s Only)	1-300
Merder mulle	State Zip Code	Date of Contribution		Aggregate This Election
real Estate Bak	1 01013	8/31/20	-	<b>d</b>
Employer		,		\$300
Blue Skies Rea	Middle Name			and the same of th
Last Name/Organization Name		Contribution Received For:		Amount of Contribution
Claussen Address		Primary Election	General Election	300
101 W. Ridge Dr.		☐ Runoff (Local Elections	Only)	
Hendersonile	State Zip Code 37075	Date of Contribution		Aggregate This Election
Photographer		9/1/22		\$ 200
Trap the Light		, , , , , ,	TO SECURE	
5. TOTAL ITEMIZED CONTRIBUTIONS				4,
(Carry forward to item 3. of next page if additional pages (if this is the last page of contributions, this amount must	of this form are used.) be shown in item 15b. of summary.)		dipercia agenta.	2500
100				

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### ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	
Tracy Schannes				FROM8/1/22	T0.9/30/22
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU					Amount Pasco
4. COMPLETE THE APPROPRIATE ITEMS FOR E	7		and the state of t	100 from any contributor	
First Name JoScoh	Middle Name	9	Contribution Received For:		Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	\$150
Address 174 Saundersn'He Rd.	4402		Runoff (Local Election	s Only)	1.00
Hendersomille	State	Zip Code 37075	Date of Contribution		Aggregate This Election
Employer Enancial Advis	SOF		9/1/20	<del>)</del>	\$150
Joseph Montallo	ano	CFP			
Eirst Name Dane	Middle Nam	е	Contribution Received For:		Amount of Contribution
Last Name(Organization Name	1		Primary Election	General Election	\$250
Address Wavecrest Cir	ck		Runoff (Local Election	s Only)	asu
City Gallatin	State	Zip Code 37066	Date of Contribution		Aggregate This Election
Occupation Personative		9/14/	\$250		
Petired.					
First Name	Middle Name		Contribution Received For:	and the second of the second o	Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	\$500
Address 700 W. Main St.			Runoff (Local Election	s Only)	30
Herdersomille.	State	Zip Code Snon5	Date of Contribution	2	Aggregate This Election
Occupation		South Management and Control of the Control	9/14/22	\$500	
McClouds Pest C	ontro	ol			
First Name	Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name	1		☐ Primary Election ☐	General Election	
Address		Runoff (Local Elections			
City	State	Zip Code	Date of Contribution	The second secon	Aggregate This Election
Occupation					
Employer					
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	of this form are	used.)			\$2400

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#### **ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR		10.0		2. REPORT COVE	RING THE PERIOD
Tracy of	phannes		FROM: 81 2	TO: 9/20/22	
3. TOTAL ITEMIZED IN-KIND C	ONTRIBUTIONS FRO	M PRECEDING PAG	E (enter \$0 if first itemized page		Amount
4. COMPLETE THE APPROPRIATE					ontributor during the period)
First Name	Middle N		In-Kind Contribution Receive	ed For:	Value of In-Kind Contribution
Last Name/Organization Name			☐ Primary Election ☐ Runoff (Local Election		
Address			Date of In-Kind Contribution		Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	1	
Occupation	Employer				
First Name	First Name Middle Name			ed For:  General Election	Value of In-Kind Contribution
Last Name/Organization Name			☐ Primary Election ☐  Runoff (Local Electio	/	
Address			Date of In-Kind Contribution		Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution		1
Occupation	Employer		7. /		
First Name	irst Name Middle Name		In-Kind Contribution Receive	ed For:  General Election	Value of In-Kind Contribution
Last Name/Organization Name			Runoff (Local Election		
Address			Date of In-Kind Contribution		Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	1	
Occupation	Employer				
First Name	Middle N	arne	In-Kind Contribution Receive		Value of In-Kind Contribution
Last Name/Organization Name	/	/	☐ Primary Election ☐ Runoff (Local Election		
Address			Date of In-Kind Contribution	its Othy)	Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution		1
Occupation	Employer				
First Name	Middle Na	me	In-Kind Contribution Receive	ed For:	Value of In-Kind Contribution
Last Name/Organization Name			Primary Election  Runoff (Local Election	General Election	
Address	-		Date of tn-Kind Contribution	is Utily)	Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer	, ·			
TOTAL ITEMIZED IN-KIND C (Carry forward to item 3, of next page if (If this is the last page of in kind contril	f additional pages of this form	are used.)	none for Peniod	this	<b>A</b>
(If this is the last page of in-kind contril  SS-1128 (Rev. 2/06)	outions, this amount must be s	nown in item 22b. of summa	ary.) Peniad	10 010	RDA 1159

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTE	E		2. REPORT COVERING THE PERIOD
Tracy Johann	The state of the s		FROM8 1/22 TO:9/20/20
TOTAL ITEMIZED CAMPAIGN EXPEND     COMPLETE THE APPROPRIATE ITEMS FOR	DITURES FROM PRECEDING PA	GE (enter \$0 if first itemized pa	ge) Amount
COMPLETE THE APPROPRIATE ITEMS FOR First Name	Middle Name		to any payee during the period)
Last Name/Business Name	-vivalité Marine	Purpose of Expenditure	Amount of Expenditure
ASAP Printing			9
116 Imperial Bly		Printing	935408
Hendersonville	State Zip Code 37075		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Fox Printing		-	
Address 931 Old hebanon	Dirt Rd.	Mailes	\$ 62
City	State Zip Code	- marks	\$1,71853
Hermitage	TN 37076		
	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Printing	7.000		
Address	Wd.	Printing	\$ 23842
City	State Zip Code		
Hendersonville First Name	TN 37075		
ast Name/Business Name	I viidule ivame	Purpose of Expenditure	Amount of Expenditure
Mr. Signman			
129 Commerce Dr		Signage	\$35397
Hendersonville	State Zip Code 37075		
irst Name	Middle Name	Purpose of Expenditure	Amount (5
ast Name/Business Name	1		Amount of Expenditure
ddress Canada		Sigmon	\$ 23
29 Commerce D	State Zip Code	5.7. 256	· (a)
Hendersonn'lle	Middle Name	Purpose of Funes di	
st Name/Business Name		Purpose of Expenditure	Amount of Expenditure
IW Dignman		Signal	\$ 250.06
dress			
129 Commerce F	State 7-0-1	orgnage	355
tendersonville	State Zip Code 37075	signage	355
129 Commerce F	State Zip Code 37075	Signage	\$3,23,129

### ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE TRACH JOHANNESON	2. REPORT COVER	TO OIL			
	110.0	Amount 29			
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU					3231
4. COMPLETE THE APPROPRIATE ITEMS FOR E	organism sales (sales)	DECEMBER STORM AND THE RESIDENCE OF THE STORM AND STORM		) to any payee during the per	Carration (Patter or at the local and the
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Kely & McKinky Branding			Campaign	Materials	\$ , ,,,,
142 River Chase Dr			, 0		11040
Herderson 1k	State	Zip Code 31075			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		1,10			
Address					
City	State	Zip Code			
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State Zip Code				
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	beers or more special pro-				
Address					
City	State	Zip Code			
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name	Middle Nam	е	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address				- Address	
City	Zip Code			,	
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	74,27129				

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RDA 1159

#### **ITEMIZED STATEMENT OF LOANS - CANDIDATE**

NAME OF CANDIDA  Tracey  3. COMPLETE THE AFT			TEMIZ	ED LOAN	loans totaling	nore than \$100			Married Woman and Address of the Owner, where the Owner, which the Owner,	TO 9/30/20
							Thursday Good Go	during the per	1007	
Complete the Following for First Name	or the Source of the Loan Middle Na		-	Outstanding I	oan Balance	Loans	1 1	oan	Oute	landing Loan Balance
I NO STATE OF				(Beginning		Receive		ments	Cots	(End of Period)
Last Name/Organization Nam	е	* * * * * * * * * * * * * * * * * * * *								
Address				Loan Receiv	ad For			Date of Loa		
				□ Primar		☐ Genera	Election	Date of Loa	n	
City	State	Zip Code			(Local Elections		CIBCION		/	
	List All Ende	veere or Guar	antore fe				d please attach	2 5000)	/	
First Name	ESCALETO	Middle Name		of Above Loa	First Name	ice is needed	please attach	a page)	Liddle	Name
110(110)		INITUGIC INDITE			Past Name				Middle	Name
Last Name/Organization Nam	ė				Last Name/Or	ganization Nar	ne			
Address					Address			-	-	
City		State	Zip Co	ode	City				State	Zip Code
									JIONE	Zip Coole
Amount Guaranteed Outstand	ling				Amount Guara	inteed Outstag	ding			
First Name		Middle Name	ė	No. SAN	First Name	-			Middle	Name
Last Name/Organization Nam	e				Last NamerO	ganization Nar	ne			
Address					Address					
City		State	Zip Co	ode	City			-	State	Zip Code
Amount Guaranteed Outstand	ing				Amount Guara	nteed Outstan	ding			
Final		7								
First Name		Middle Name	9		First Name				Middle	e Name
Last Name/Organization Name	e		1		Lasi Name/Or	ganization Nar	ne			arrayle or take
Address			$\overline{}$		Address					
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstand	ing	/			Amount Guara	nteed Outstan	ding			
First Name	/	Middle Nove			 					
ristivanie		Middle Name	3		First Name				Middle	Name
Last Name/Organization Name	e /				Last Name/Or	ganization Nan	ne			
Address					Address					
City	/	Slate	Zip Co	vde	City			2=	01-	7.04
Amount Guaranteed Outstand	ing.	0.00	Lapta	ne.					State	Zip Code
Alloyuli Guaranteed Outstand	ing .				Amount Guara	nteed Outstand	ding			
4. Totals for all Loans (co	omplete on last page o	fitemized loa	ins)	7 4 -	Outstanding L		Loans	Loan	You are	Outstanding Loan Balance
(Total loans received should (Total loan payments should	also be shown in item 20 on	summary page	3		(Beginning	of Period)	Received	Payme	ents	(End of Period)
(Total outstanding loan balance	ce should also be shown in ite	m 12.e. an front	page.)							<b>—</b> Ø
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#### **ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
Tracy Johann				FROM: 8 L		9/30/2
<ol> <li>COMPLETE THE APPROPRIATE ITEMS F OBLIGATION (obligations totaling more that person/vendor at the end of the reporting per</li> </ol>	100 ow		Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Na	me				
Last Name/Business Name			-			
Address						
City	State	Zip Code				
Description of Obligation	1	1				L
First Name	Middle Na	me	T			
Last Name/Business Name			-			
Address			-			
City	State	Zip Code				
Description of Obligation	1				I	I
First Name	Middle Na	me				
Last Name/Business Name			4			
Address			-			
City	State	Zip Code	1			
Description of Obligation	/	/				
First Name	Middle Na	me				
Last Name/Business Name	4		-			
Address						
City	State	Zip Code	-			
Description of Obligation	<u> </u>	1				
First Name	Middle Na	me			1	
Last Name/Business Name			-			
Address		_	-			
City	State	Zip Code	+			
Description of Obligation	L	1			L	
4. TOTALS						
(Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)	column mus	st also be shown	None for	this per	riad.	Ø

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