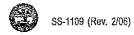
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

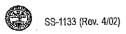
For State and Local Candidates For Single-Candidate Committees

1. DATEOFREPORT 2.a. NAME OF CANDIDATE OR COMMITTIEE D4/11/2027 DFFF G DUN(No)
1.04/111.2027
1 0, 0, 0, 0,
2.b. IF COMMITTEE, NAME OF CANDIDATE 3. ELECTION DATE
05/03/2022
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone
120 N. NATHRIDGE NAY (GOODLETS / 145 1 4.5.7072 (415) 9 75 7 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)
Street or Rural Route City State Zip Code Phone
120 N. WYNDIDGE WAY GOODLITSVILLE TO 37072 (615) 979
5. OFFICE SOUGHT (include district number, if applicable) 6. NAME OF POLITICAL TREASURER (may be candidate)
SCHOOL BOARD DISTIZION 5 JEFF G. DUNCON
7. CATEGORY OR REPORT (Check one)
ARST SECOND THEO FOURTH PRE- PRE- MID-YEAR YEAR-END
QUARTER QUARTER QUARTER PRIMARY GENERAL SUPPLEMENTAL SUPPLEMENTAL 8.a. BEGINNING DATE OF REPORTING PERIOD 8.b. ENDING DATE OF REPORTING PERIOD
01/16/2027 03/31/ 2022
9. (Check one)
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 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 Tederal internal revenue code.
Attorna dala Attorna dala
4/10/12
date signature of candidate date signature of political treasurer date
11. WITNESS SIGNATURE
Λ
Innufer Timean 9/10/22 CHWILL & Shear 9/10/22
signature of witness date signature of witness date
12. SUMMARY
a. BALANCE ON HAND LAST REPORT\$
2 21.7 79
5. TOTAL RECEIPTS THIS PERIOD
- Z, Z 62, 79
c. TOTAL DISBURSEMENTS THIS PERIOD APR 1 1 2022
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) SUMNER COUNTY \$
ELECTION COMMISSION
e. TOTAL LOANS OUTSTANDING
f. TOTAL OBLIGATIONS OUTSTANDING \$ - CO-



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	FROM: 1/16/22 TO: 3/3/22
RECEIPTS	1,010
15. CONTRIBUTIONS (other than loans and interest)	
a. Uniternized Contributions (\$100 or less from each source this period)	======================================
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>2,202.11</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.	0.)\$
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ -0-
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$0_
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 2,262.79
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)
STAPLES PRINTING \$ 43	
\$	
\$	
\$ \$ \$	
\$ \$	
\$.
3	
\$	
Total of Expenditures (\$100 or less each payee)	
b. Itemized Expenditures (Over \$100 each payee this period)	<u> </u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	<u> </u>
20 LOAN REPAYMENTS MADE THIS PERIOD	\$ -0-
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 2,262.79
22.IN-KIND CONTRIBUTIONS	
Unitemized in-kind contributions (\$100 or less from each source this period)	s ~ O ~
to the triad and tributions (aver \$100 from each course this posted)	s - O -
temized in-kind contributions (over \$100 from each source this period)	22 h) \$ - 🔾 -
23. OBLIGATIONS	,
LL V. C. LONG. Contains (\$400 as loss costs)	s -O -
b. Itemized Obligations Outstanding (Over \$100 each)	
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown	Filem 12.E.)



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	JETT G	1	. 1512	2. REPORT COVE	· · · · · · · · · · · · · · · · · · ·			
				FROM: 1/14 ZL	TO: 3/31/17			
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	-0-							
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 NamerBusiness Name	PINT (MG	YARD SIGNS		11 0			
Address 100 HAYDEN AVENU	-	<u> </u>	DOOR HANGERS		\$ 868.39			
CIT I DEN AVENU	State Zip Code	в ,	CAR MAGNETS					
CA (EXINGIDU	State Zip Cool	421	3407114011613					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name	WEEN LU		TPU 5TS					
Address 911 CENTER POINT RD		WIRETHO		\$198.28				
City	State Zip Code	~]	•				
HENDERSONVIUE	10 30	37075	· ·					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last NamerBusiness Name SOS PRINTING		LARGE SIGNS		11				
Address 7010 Space Para	Address 706 SPACE PARL NORTH		THRUE SIGNS		\$ 629.28			
CIA DLYCE I VAN	State Zip Code		1					
GOODLITSVILLE	TD 37	072						
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name SIGNS ONT	Last NamerBusiness Name SIGNS ONTHE CHEAP, LOM				h /2			
Address 11525A STONEHOUDW DR SWITE 100			YARD SIGNS		\$ 522.85			
City City	State Zip Code							
AUSTIN	TX 78	758						
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name		· · · · · · · · · · · · · · · · · · ·						
Address								
City	State Zip Code							
First Name	irst Name Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address				j				
City	State Zip Code				į			
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of fifthis is the last page of expenditures, this amount must it)	of this form are used.) the shown in item 19b. of s	summary.)		4	72,218.80			

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE	DEFF 6	Du	NUMN	2. REPORT COVER	TO: 3/3			
Amount N. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)								
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)								
First Name JEFF	Middle Name 🕒		Contribution Received For:		Amount of Co	intribution		
Last Name/Organization Name DUNCA (CANIDATE)	General Election	2,21	2.79		
Address 120 N. WYNRING WAY		Runoff (Local Election	ns Only)					
GOODLETTSVILLE	State Zio Code 370	72	Date of Contribution		Aggregate Th	ŀ		
		3/31/22	7,262.79					
Employer METRO WATER STRVICKS		(CANDIBI	OKD	100%				
First Name	Middle Name		Contribution Received For	r:	Amount of	Contribution		
Last Name/Organization Name	<u> </u>		Primary Election	General Election				
Address		Runoff (Local Election		·				
City	State Zip Code		Date of Contribution		Aggregate T	his Election		
Occupation	L		-					
Employer								
First Name Middle Name		Contribution Received Fo	pr:	Amount of	Contribution			
Last Name/Organization Name		Primary Election	General Election					
Address		Runoff (Local Election	ons Only)		=			
	State Zip Cod		Date of Contribution		Aggregate 1	his Election		
City	State Zip Cod		- Date of Contribution		/ Aggrogato	THE CISCUST		
Occupation								
Employer								
First Name	Middle Name		Contribution Received For	•	Amount of	Contribution		
Last Name/Organization Name		Primary Election	General Election					
Address		Runoff (Local Electi	ions Only)					
City	State Zip Code	e	Date of Contribution		Aggregate 1	This Election		
Occupation	<u></u>							
Employer		-						
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional page: (If this is the last page of contributions, this amount must	s of this form are used.) It be shown in Item 15b. c	of summary.)		· · · · · · · · · · · · · · · · · · ·				

Page _____ of ____