

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>7/11/16</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Brittany Stevens</u>		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>8/4/16</u>	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route <u>P.O. Box 1049</u>	City <u>Smyrna</u>	State <u>TN</u>	Zip Code <u>37167</u> Phone <u>615-653-3933</u>
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route <u>120 Burtonwood Dr.</u>	City <u>Smyrna</u>	State <u>TN</u>	Zip Code <u>37167</u> Phone <u>615-653-3933</u>
5. OFFICE SOUGHT (include district number, if applicable) <u>Town court clerk</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Ellen Longworth</u>	
7. CATEGORY OR 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 <u>4/1/16</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>6/30/16</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>[Signature]</u> signature of candidate		<u>7/10/16</u> date	
<u>[Signature]</u> signature of political treasurer		<u>7-10-16</u> date	
11. WITNESS SIGNATURE			
<u>[Signature]</u> signature of witness		<u>7/10/16</u> date	
<u>[Signature]</u> signature of witness		<u>7/10/16</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	\$ <u>0.00</u>		
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>2,275.00</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>548.25</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>1,726.75</u>		
e. TOTAL LOANS OUTSTANDING	\$ <u>500.00</u>		
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>373.75</u>		



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Brittany Stevens</i>				2. REPORT COVERING THE PERIOD FROM: <i>4/1/16</i> TO: <i>6/30/16</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>\$0.00</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Dora</i>		Middle Name <i>D.</i>		Contribution Received For:	
Last Name/Organization Name <i>Stevens</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>600 Watsonwood Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Washville</i>		State <i>TN</i>	Zip Code <i>37211</i>	Date of Contribution <i>5/20/16</i>	
Occupation <i>Retired</i>				Aggregate This Election <i>\$300.00</i>	
Employer <i>Retired</i>					
First Name <i>Beth</i>		Middle Name <i>E.</i>		Contribution Received For:	
Last Name/Organization Name <i>Thonesberry</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>204 Mi-Tech Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Murfreesboro</i>		State <i>TN</i>	Zip Code <i>37130</i>	Date of Contribution <i>5/20/16</i>	
Occupation <i>Real Estate</i>				Aggregate This Election <i>\$500.00</i>	
Employer <i>Self-employed</i>					
First Name <i>Robin</i>		Middle Name <i>L.</i>		Contribution Received For:	
Last Name/Organization Name <i>Parks</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>5431 Cliffstone Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Smyrna</i>		State <i>TN</i>	Zip Code <i>37167</i>	Date of Contribution <i>5/31/16</i>	
Occupation <i>Homemaker</i>				Aggregate This Election <i>\$150.00</i>	
Employer <i>Homemaker</i>					
First Name <i>Dawn</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>White</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>1572 Riverview Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Murfreesboro</i>		State <i>TN</i>	Zip Code <i>37129</i>	Date of Contribution <i>6/6/16</i>	
Occupation <i>State Representative</i>				Aggregate This Election <i>\$150.00</i>	
Employer <i>State of Tennessee</i>					
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.)					<i>\$1,100.00</i>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Brittany Stevens</i>				2. REPORT COVERING THE PERIOD FROM: <i>4/1/16</i> TO: <i>6/30/16</i>		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>\$1,100.00</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name <i>Jerome</i>		Middle Name <i>D.</i>		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <i>Dempsey</i>		Address <i>1009 Rosemont Terrace</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>\$250.00</i>
City <i>Smyrna</i>		State <i>TN</i>	Zip Code <i>37167</i>	Date of Contribution <i>6/22/16</i>		Aggregate This Election
Occupation <i>Engineer</i>		Employer <i>Dempsey, Billing & Associates</i>				<i>\$250.00</i>
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
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		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
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		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation		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.)					<i>\$1,350.00</i>	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Brittany Stevens</i>			2. REPORT COVERING THE PERIOD		
			FROM: <i>4/1/16</i>	TO: <i>6/30/16</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>\$0.00</i>	
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 <i>GRIFFIN STRATEGIES, LLC</i>				<i>signs</i>	<i>\$473.75</i>
Address <i>1715-K South Rutherford Blvd #272</i>					
City <i>Murfreesboro</i>		State <i>TN</i>	Zip Code <i>37130</i>		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
5. TOTAL ITEMIZED EXPENDITURES				<i>\$473.75</i>	
(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 <i>Brittany Stevens</i>				2. REPORT COVERING THE PERIOD FROM: <i>4/1/16</i> TO: <i>6/30/16</i>											
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 <i>Brittany</i>		Middle Name <i>S.</i>		Outstanding Loan Balance (Beginning of Period) <i>\$0.00</i>		Loans Received <i>\$500.00</i>	Loan Payments <i>\$0.00</i>	Outstanding Loan Balance (End of Period) <i>\$500.00</i>							
Last Name/Organization Name <i>Stevens</i>				Address <i>120 Bitterwood Dr.</i>				Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Date of Loan <i>4/22/16</i>					
City <i>Smyrna</i>		State <i>TW</i>		Zip Code <i>37167</i>											
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							
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)				Outstanding Loan Balance (Beginning of Period)				Loans Received		Loan Payments		Outstanding Loan Balance (End of Period)			
(Total loans received should also be shown in item 16, on summary page.)				<i>\$0.00</i>				<i>\$500.00</i>		<i>\$0.00</i>		<i>\$500.00</i>			
(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.)															



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
Brittany Stevens				FROM: 4/1/16		TO: 6/30/16	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
First Name	Middle Name		\$0.00	\$847.50	\$473.75	\$373.75	
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name: _____ Middle Name: _____ Last Name/Business Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Description of Obligation: _____							
First Name: _____ Middle Name: _____ Last Name/Business Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Description of Obligation: _____							
First Name: _____ Middle Name: _____ Last Name/Business Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Description of Obligation: _____							
First Name: _____ Middle Name: _____ Last Name/Business Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Description of Obligation: _____							
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)			\$0.00	\$847.50	\$473.75	\$373.75	