

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="text-align: center; font-size: 1.2em; font-family: cursive;">Dennis Johnson</div>	14. REPORT COVERING THE PERIOD FROM: <u>7/26/16</u> TO: <u>9/30/16</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>2555.00</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>6200.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>8755.00</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>8755.00</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>Rental Fec/ Building</u>	\$ <u>75.00</u>
<u>Postage</u>	\$ <u>58.00</u>
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
Total of Expenditures (\$100 or less each payee)	\$ <u>133.00</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>3187.32</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>3320.32</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>3320.32</u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u>0</u>
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ <u>0</u>
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)	\$ <u>0</u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>0</u>
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 <p style="text-align: center; font-size: 1.2em;">DENNIS JOHNSON</p>				2. REPORT COVERING THE PERIOD FROM: 7/26/16 TO: 9/30/16		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name DENNIS		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name JOHNSON JR				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		1500.00
Address 100 BLUETICK COURT				<input type="checkbox"/> Runoff (Local Elections Only)		
City SMYRNA		State TN	Zip Code 37167	Date of Contribution 9/1/16		Aggregate This Election
Occupation Codes						1500.00
Employer TOWN OF SMYRNA						
First Name JENNIFER		Middle Name B		Contribution Received For:		Amount of Contribution
Last Name/Organization Name JOHNSON				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		1500.00
Address 100 BLUETICK COURT				<input type="checkbox"/> Runoff (Local Elections Only)		
City SMYRNA		State TN	Zip Code 37167	Date of Contribution 9/1/16		Aggregate This Election
Occupation Teacher						1500.00
Employer RUTHERFORD COUNTY Bd OF EDU						
First Name KENNETH		Middle Name W		Contribution Received For:		Amount of Contribution
Last Name/Organization Name VICTORY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		750.00
Address 137 SUGAR CREEK LANE				<input type="checkbox"/> Runoff (Local Elections Only)		
City SMYRNA		State TN	Zip Code 37167	Date of Contribution 9/6		Aggregate This Election
Occupation Retired						750.00
Employer CROSSLIN SUPPLY CO. INC.						
First Name ESTHOR		Middle Name C		Contribution Received For:		Amount of Contribution
Last Name/Organization Name VICTORY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		750.00
Address 137 SUGAR CREEK LANE				<input type="checkbox"/> Runoff (Local Elections Only)		
City SMYRNA		State TN	Zip Code 37167	Date of Contribution 9/6		Aggregate This Election
Occupation Retired						750.00
Employer RUTHERFORD COUNTY Bd. OF EDU.						
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.)					4500.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE DENNIS JOHNSON				2. REPORT COVERING THE PERIOD FROM: 9/24/16 TO: 9/30/16		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 4500.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name TONY		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name Campbell				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		1000.00
Address 2920 Greentree Drive				<input type="checkbox"/> Runoff (Local Elections Only)		
City SMYRNA		State TN	Zip Code 37167	Date of Contribution 9/10		Aggregate This Election 1000.00
Occupation TOWING						
Employer SELF						
First Name ANTHONY		Middle Name R.		Contribution Received For:		Amount of Contribution
Last Name/Organization Name JOHNSON				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		200.00
Address 101 GOVERNOR COURT				<input type="checkbox"/> Runoff (Local Elections Only)		
City SMYRNA		State TN	Zip Code 37167	Date of Contribution 9/22		Aggregate This Election 200.00
Occupation RETIRED						
Employer AVCO						
First Name TOM		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name Trimble				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		500.00
Address 13733 SE 202ND PL				<input type="checkbox"/> Runoff (Local Elections Only)		
City KENT		State WAsh	Zip Code 98042	Date of Contribution 9/2		Aggregate This Election 500.00
Occupation Route Driver						
Employer UNITED Parcel Service						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(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.)</small>					6200.00	



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>DENNIS JOHNSON</i>				2. REPORT COVERING THE PERIOD FROM: <i>7/26/16</i> TO: <i>9/30/16</i>		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)						
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer					
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer					
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer					
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer					
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer					
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in Item 22b. of summary.)					<i>0</i>	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>DENNIS JOHNSON</i>		2. REPORT COVERING THE PERIOD		
		FROM: <i>7/26/16</i>	TO: <i>9/30/16</i>	
		Amount <i>0</i>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				
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>Sign Graphics</i>		<i>DECALS AND MAGNETS</i>	<i>671.68</i>	
Address <i>171 FRONT STREET</i>				
City <i>SMYRNA</i>	State <i>TN</i>			Zip Code <i>37167</i>
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>SPOTLIGHT</i>		<i>Shirts</i>	<i>930.68</i>	
Address <i>6620 ROCKY FORK ROAD</i>				
City <i>SMYRNA</i>	State <i>TN</i>			Zip Code <i>37167</i>
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>Sign Graphics</i>		<i>SIGNS</i>	<i>1180.08</i>	
Address <i>171 FRONT STREET</i>				
City <i>SMYRNA</i>	State <i>TN</i>			Zip Code <i>37167</i>
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>SPOTLIGHT</i>		<i>Shirts</i>	<i>130.00</i>	
Address <i>6620 ROCKY FORK ROAD</i>				
City <i>SMYRNA</i>	State <i>TN</i>			Zip Code <i>37167</i>
First Name <i>JANET</i>	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>JOHNSON</i>		<i>KICKOFF SUPPLIES COOKIES-NAPKINS PLATES-ICE</i>	<i>274.88</i>	
Address <i>408 ALMAVILLE ROAD</i>				
City <i>SMYRNA</i>	State <i>TN</i>			Zip Code <i>37167</i>
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State			Zip Code
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.)			<i>3187.32</i>	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <p style="text-align: center; font-size: 1.2em;">DENNIS JOHNSON</p>	2. REPORT COVERING THE PERIOD FROM: <u>7/26/16</u> TO: <u>9/30/16</u>
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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 <u>DENNIS</u>	Middle Name <u>F</u>	Outstanding Loan Balance (Beginning of Period) <u>5000.00</u>	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period) <u>5000.00</u>
Last Name/Organization Name <u>JOHNSON</u>					
Address <u>408 Almadale ROAD</u>		Loan Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Date of Loan <u>7/21/16</u>	
City <u>SMYRNA</u>	State <u>IN</u>	Zip Code <u>37167</u>	<input type="checkbox"/> Runoff (Local Elections Only)		

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			
City	State	City	State
Zip Code		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			
City	State	City	State
Zip Code		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			
City	State	City	State
Zip Code		Zip Code	
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	

4. Totals for all Loans (complete on last page of itemized loans) <small>(Total loans received should also be shown in item 16, on summary page.) (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.)</small>	Outstanding Loan Balance (Beginning of Period) <u>5000.00</u>	Loans Received <u>0</u>	Loan Payments <u>0</u>	Outstanding Loan Balance (End of Period) <u>5000.00</u>
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ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<i>DENNIS JOHNSON</i>				FROM: <i>7/26/16</i>		TO: <i>9/30/16</i>	
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					
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				0			0
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							