

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>10-9-22</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Clif Hutson</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>3674 Hwy 31W</u> <u>White House</u> <u>TN</u> <u>37188</u> <u>615-347-2759</u>			
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) <u>Mayor - City of White House</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Mark Reid</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" 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>7-1-22</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>9-30-22</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>Clif Hutson</u> signature of candidate		<u>10-9-22</u> date	
<u>Mark Reid</u> signature of political treasurer		<u>10-9-22</u> date	
11. WITNESS SIGNATURE			
<u>Kim Reid</u> signature of witness		<u>10-9-22</u> date	
signature of witness		date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>1600.05</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>7978.64</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>6105.60</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>3473.09</u>	
e. TOTAL LOANS OUTSTANDING		\$ _____	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>Zero (0) for 3rd Quarter</u> 2025.09	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="font-size: 1.2em; font-family: cursive;">Clif Hutson</div>	14. REPORT COVERING THE PERIOD FROM: <u>7-1-22</u> TO: <u>9-30-22</u>
--	--

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ _____

b. Itemized Contributions (over \$100 from each source this period) \$ 7,978.64

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 7,978.64

16. LOANS RECEIVED THIS REPORTING PERIOD \$ _____

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ _____

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 7,978.64

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)

	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Total of Expenditures (\$100 or less each payee) \$ _____

b. Itemized Expenditures (Over \$100 each payee this period) \$ 6,105.60

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 6,105.60

20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 6,105.60

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.) \$ _____

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ _____

b. Itemized Obligations Outstanding (Over \$100 each) \$ 2,025.09

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ 2,025.09



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Clif Hutson				2. REPORT COVERING THE PERIOD FROM: 7-1-22 TO: 9-30-22		
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 Tom Byrum		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name Byrum		Address 100 Byrum Dr		<input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		1,500
City White House		State TN	Zip Code 37188	Date of Contribution 7-9-22		Aggregate This Election
Occupation Retired		Employer				
First Name Fran		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name Hutson		Address 3674 Hwy 31W		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		1,600
City White House		State TN	Zip Code 37188	Date of Contribution 7-9-22		Aggregate This Election
Occupation Millipore Signa		Employer				
First Name Clif		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name Hutson		Address 3674 Hwy 31W		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		1,600
City White House		State TN	Zip Code 37188	Date of Contribution 7-9-22		Aggregate This Election
Occupation Retired		Employer				
First Name Martha		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name Wilkinson		Address		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200
City White House		State TN	Zip Code 37188	Date of Contribution 7-9-22		Aggregate This Election
Occupation Retired		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>					4,900	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Clif Hutson		2. REPORT COVERING THE PERIOD FROM: 7-1-22 TO: 9-30-22	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 4,900
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name Sherry	Middle Name	Contribution Received For:	
Last Name/Organization Name Eden		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City White House	State TN	Zip Code 37188	Amount of Contribution 500
Occupation Retired	Date of Contribution 8-29-22		Aggregate This Election
Employer			
First Name Mike and Rita	Middle Name	Contribution Received For:	
Last Name/Organization Name Honeycutt		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 210 Denise Circle		<input type="checkbox"/> Runoff (Local Elections Only)	
City Cottontown	State TN	Zip Code 37048	Amount of Contribution 500
Occupation Realtor/Hairdresser	Date of Contribution		Aggregate This Election
Employer			
First Name Charlie/Melissa	Middle Name	Contribution Received For:	
Last Name/Organization Name Strickland		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 3399 Maxie Jones Rd		<input type="checkbox"/> Runoff (Local Elections Only)	
City Springfield	State TN	Zip Code 37172	Amount of Contribution 500
Occupation Construction/Retired	Date of Contribution		Aggregate This Election
Employer			
First Name Dale	Middle Name	Contribution Received For:	
Last Name/Organization Name Broadrick		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 3003 Brick Church Pike		<input type="checkbox"/> Runoff (Local Elections Only)	
City Nashville	State TN	Zip Code 37207	Amount of Contribution 500
Occupation President - trucking Co.	Date of Contribution		Aggregate This Election
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>			2,000

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clif Hutson</i>				2. REPORT COVERING THE PERIOD	
				FROM: <i>7-1-22</i>	TO: <i>9-30-22</i>
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>6,900</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>John and Dawn</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Fletcher</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>4610 Old Hwy 31W</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Cottonwood</i>		State <i>TN</i>	Zip Code <i>37048</i>	Date of Contribution <i>9-10-22</i>	
Occupation <i>Manager/Account Reps</i>				Amount of Contribution <i>250</i>	
Employer				Aggregate This Election	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Colorado Grill</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>2747 Hwy 31W</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>White House</i>		State <i>TN</i>	Zip Code <i>37188</i>	Date of Contribution <i>9-14-22</i>	
Occupation				Amount of Contribution <i>828.64</i>	
Employer				Aggregate This Election	
First Name		Middle Name		Contribution Received For:	
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	
Occupation				Amount of Contribution	
Employer				Aggregate This Election	
First Name		Middle Name		Contribution Received For:	
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	
Occupation				Amount of Contribution	
Employer				Aggregate This Election	
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>					<i>7,978.64</i>

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Cliff Hutson			2. REPORT COVERING THE PERIOD FROM: 7-1-22 TO: 9-30-22	
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 Lamar Signs		signage		1,200
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Ink n Screens		shirts		1,386.09
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name 4Over		signs		1,732
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name GoDaddy		website		89
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Ink n Screens		shirts		1,444.59
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Ink n Screens		shirts		253.92
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.)				6,105.60



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <div style="text-align: center; font-size: 1.2em; font-family: cursive;">Cliff Hutson</div>				2. REPORT COVERING THE PERIOD FROM: 7-1-22 TO: 9-30-22													
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		Middle Name		NONE		Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)								
Last Name/Organization Name				Address				Loan Received For:		Date of Loan							
City		State		Zip Code		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election											
				<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								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.) (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					
Clif Hutson			FROM: 7-1-22		TO: 9-30-22			
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	NONE 3 rd Qtr						
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.)								