

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>JANUARY 18 2022</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>JEREMY MANFIELD</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>109 COPPER CREEK DR. GOODLETTSVILLE TN 37072 (615-815-0250)</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>DISTRICT 11 COUNTY COMMISSIONER</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>JEREMY MANFIELD</u>
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input 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 checked="" type="checkbox"/> MID-YEAR SUPPLEMENTAL <input checked="" type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b. ENDING DATE OF REPORTING PERIOD
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><i>Jeremy Manfield</i></u> signature of candidate	<u>1/18/22</u> date
<u><i>Jeremy Manfield</i></u> signature of political treasurer	<u>1/18/22</u> date
11. WITNESS SIGNATURE	
<u><i>Tiffany Manfield</i></u> signature of witness	<u>1/18/22</u> date
<u><i>T Manfield</i></u> signature of witness	<u>1/18/22</u> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>980.56</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ 0.00 <u>1,050.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>29.39</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>2,001.17</u>
FILED	
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>
JAN 21 2022	
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>
SUMNER COUNTY ELECTION COMMISSION	



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE JEREMY WANSFIELD			2. REPORT COVERING THE PERIOD	
			FROM: 7/21	TO: 1/22
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name MELANIE MCDANIEL	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address 164 SPENCER CREEK RD.		<input type="checkbox"/> Runoff (Local Elections Only)		
City FRANKLIN	State TN	Zip Code 37069	Date of Contribution 1/5/22	Aggregate This Election \$1,000.00
Occupation				
Employer				
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				
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				
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.)</small>				
<small>(If this is the last page of contributions, this amount must be shown in item 15b. of summary.)</small>				