

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 01-18-2022	2.a. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk		
2.b. IF COMMITTEE, NAME OF CANDIDATE Carolyn Templeton		3. ELECTION DATE 05-03-2022	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route 2081 Rodman Blvd	City Gallatin	State TN	Zip Code 37066
		Phone 615-452-6920	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route 2081 Rodman Blvd	City Gallatin	State TN	Zip Code 37066
		Phone 615-452-6920	
5. OFFICE SOUGHT (include district number, if applicable) County Clerk		6. NAME OF POLITICAL TREASURER (may be candidate) Bill Kemp	
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 checked="" 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 11-01-2021		8.b. ENDING DATE OF REPORTING PERIOD 01-15-2022	
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>Carolyn Templeton</u> signature of candidate		<u>Bill Kemp</u> signature of political treasurer	
1-17-22 date		1-17-22 date	
11. WITNESS SIGNATURE			
<u>Caleb Daugherty</u> signature of witness		<u>Caleb Daugherty</u> signature of witness	
1-17-22 date		1-17-22 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$	0.00
b. TOTAL RECEIPTS THIS PERIOD		\$	18,550.00
c. TOTAL DISBURSEMENTS THIS PERIOD		\$	232.68
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$	18,317.32
e. TOTAL LOANS OUTSTANDING		\$	0.00
f. TOTAL OBLIGATIONS OUTSTANDING		\$	0.00

FILED PM
AM
JAN 18 2022
SUMNER COUNTY
ELECTION COMMISSION



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD	
				FROM: 11-01-21	TO: 01-15-22
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 WILLIAM		Middle Name W		Contribution Received For:	
Last Name/Organization Name KEMP				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General	
Address 1132 BROWNS LN				<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN		State TN	Zip Code 37066	Date of Contribution	
Occupation COUNTY CLERK				11/2/2021	
Employer SUMNER COUNTY				Amount of Contribution \$ 1600	
Aggregate This Election \$ 1600					
First Name WAYNE		Middle Name B		Contribution Received For:	
Last Name/Organization Name PRUETT				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General	
Address 1204 RUSSELL ST				<input type="checkbox"/> Runoff (Local Elections Only)	
City PORTLAND		State TN	Zip Code 37148	Date of Contribution	
Occupation RETIRED				11/3/2021	
Employer				Amount of Contribution \$ 400	
Aggregate This Election \$ 400					
First Name PAMELA		Middle Name J		Contribution Received For:	
Last Name/Organization Name OGDEN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General	
Address 1132 BROWNS LN				<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN		State TN	Zip Code 37066	Date of Contribution	
Occupation SELF EMPLOYED				11/3/2021	
Employer BCR, INC				Amount of Contribution \$ 1600	
Aggregate This Election \$ 1600					
First Name JESSE		Middle Name J		Contribution Received For:	
Last Name/Organization Name HUGHES				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General	
Address 1031 LAKESHORE DR				<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN		State TN	Zip Code 37066	Date of Contribution	
Occupation CPA				11/6/2021	
Employer RETIRED				Amount of Contribution \$ 1600	
Aggregate This Election \$ 1600					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional paged of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. Of summary.)					5,200

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD FROM: 11-01-21 TO: 01-15-22		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					AMOUNT 5200	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name BETTY ANN		Middle Name		Contribution Received For:		Amount of Contribution \$ 250
Last Name/Organization Name GOODALL				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		
Address 935 PLANTATION BLVD				<input type="checkbox"/> Runoff (Local Elections Only)		
City GALLATIN	State TN	Zip Code 37066		Date of Contribution 11/12/2021		Aggregate This Election \$ 250
Occupation RETIRED						
Employer						
First Name F		Middle Name D		Contribution Received For:		Amount of Contribution \$ 250
Last Name/Organization Name CULBREATH				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		
Address 166 CAUDILL DR				<input type="checkbox"/> Runoff (Local Elections Only)		
City HENDERSONVILLE	State TN	Zip Code 37075		Date of Contribution 11/12/2021		Aggregate This Election \$ 250
Occupation RETIRED						
Employer						
First Name KEVIN		Middle Name M		Contribution Received For:		Amount of Contribution \$ 250
Last Name/Organization Name COLLIER				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		
Address 323 W MAIN ST				<input type="checkbox"/> Runoff (Local Elections Only)		
City HENDERSONVILLE	State TN	Zip Code 37075		Date of Contribution 11/12/2021		Aggregate This Election \$ 250
Occupation FINANCIAL ADVISOR						
Employer COLLIER WEALTH MGT						
First Name MICHAEL		Middle Name J		Contribution Received For:		Amount of Contribution \$ 250
Last Name/Organization Name GAUGHAM				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		
Address 120 ASHLAND PT				<input type="checkbox"/> Runoff (Local Elections Only)		
City HENDERSONVILLE	State TN	Zip Code 37075		Date of Contribution 11/12/2021		Aggregate This Election \$ 250
Occupation REAL ESTATE BROKER						
Employer REMAX						
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional paged of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. Of summary.)					6200	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD		
<i>Carolyn Templeton for County Clerk</i>			FROM: 11-01-21	TO: 01-15-22	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					AMOUNT 6200
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name DAVID		Middle Name M		Contribution Received For:	
Last Name/Organization Name BLACK				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General <input type="checkbox"/> Runoff (Local Elections Only)	
Address 1254 WAVECREST CIR				\$ 1000	
City GALLATIN	State TN	Zip Code 37066		Date of Contribution 11/12/2021	Aggregate This Election \$ 1000
Occupation RETIRED					
Employer					
First Name PAULA		Middle Name C		Contribution Received For:	
Last Name/Organization Name DEBERRY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General <input type="checkbox"/> Runoff (Local Elections Only)	
Address 102 BLUEWATER DR				\$ 1000	
City GALLATIN	State TN	Zip Code 37066		Date of Contribution 11/12/2021	Aggregate This Election \$ 1000
Occupation RETIRED					
Employer					
First Name STEVE		Middle Name		Contribution Received For:	
Last Name/Organization Name BOTTS				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General <input type="checkbox"/> Runoff (Local Elections Only)	
Address 100 BLUEGRASS CNS				\$ 150	
City HENDERSONVILLE	State TN	Zip Code 37075		Date of Contribution 11/15/2021	Aggregate This Election \$ 150
Occupation SR ADVISOR					
Employer HERTIAGE FINANCIAL					
First Name PETER		Middle Name J		Contribution Received For:	
Last Name/Organization Name FLYNN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General <input type="checkbox"/> Runoff (Local Elections Only)	
Address 1462 DICKERSON BAY DR				\$ 200	
City GALLATIN	State TN	Zip Code 37066		Date of Contribution 11/15/2021	Aggregate This Election \$ 200
Occupation RETIRED					
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS					
(Carry forward to item 3. of next page if additional paged of this form are used.)					
(If this is the last page of contributions, this amount must be shown in item 15b. Of summary.)					8550

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD			
				FROM: 11-01-21	TO: 01-15-22		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					AMOUNT 8550		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name EUGENE		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name CONYER			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General			\$ 250	
Address 110 SHADY COVE RD			<input type="checkbox"/> Runoff (Local Elections Only)				
City CASTALIAN SPRINGS		State TN	Zip Code 37031	Date of Contribution		Aggregate This Election	
Occupation BUSINESS OWNER				11/15/2021		\$ 250	
Employer SHADY COVE							
First Name BRYAN		Middle Name W		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name BONDURANT			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General			\$ 250	
Address 1054 SUGARTREE LN			<input type="checkbox"/> Runoff (Local Elections Only)				
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation VETERINARIAN				11/15/2021		\$ 250	
Employer CRITTER CLINIC							
First Name ROBERT		Middle Name H		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name PATE			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General			\$ 500	
Address 441 W MAIN ST			<input type="checkbox"/> Runoff (Local Elections Only)				
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation AUTO DEALER				11/15/2021		\$ 500	
Employer BAKER MOTOR							
First Name DAVID		Middle Name N		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name SCHREINER			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General			\$ 200	
Address 2077 RODMAN BLVD			<input type="checkbox"/> Runoff (Local Elections Only)				
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation RETIRED				11/15/2021		\$ 200	
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS							
(Carry forward to item 3. of next page if additional paged of this form are used.)							
(If this is the last page of contributions, this amount must be shown in item 15b. Of summary.)					9750		

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD			
				FROM: 11-01-21	TO: 01-15-22		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					AMOUNT 9750		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name BRENDA		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name COPELAND			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General			\$ 1000	
Address 1715 ANDY JACKSON TRAIL			<input type="checkbox"/> Runoff (Local Elections Only)				
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation RETIRED			11/15/2021			\$ 1000	
Employer							
First Name ROBERT		Middle Name H		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name GOODALL, JR			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General			\$ 250	
Address 393 MAPLE ST			<input type="checkbox"/> Runoff (Local Elections Only)				
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation HOME BUILDER			11/17/2021			\$ 250	
Employer GOODALL HOMES							
First Name ANNE		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name COPELAND			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General			\$ 500	
Address 165 HICKS RD			<input type="checkbox"/> Runoff (Local Elections Only)				
City NASHVILLE		State TN	Zip Code 37221	Date of Contribution		Aggregate This Election	
Occupation RETIRED			11/21/2021			\$ 500	
Employer							
First Name MICHAEL		Middle Name W		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name COOK			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General			\$ 200	
Address 975 BLUE JAY WAY			<input type="checkbox"/> Runoff (Local Elections Only)				
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation RETIRED			11/24/2021			\$ 200	
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.)					11700		

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD	
				FROM: 11-01-21	TO: 01-15-22
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					AMOUNT 11700
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name WILMA		Middle Name T		Contribution Received For:	
Last Name/Organization Name PHILLIPS				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General <input type="checkbox"/> Runoff (Local Elections Only)	
Address 1155 NASHVILLE PK				Amount of Contribution \$ 150	
City GALLATIN	State TN	Zip Code 37066	Date of Contribution 11/24/2021		Aggregate This Election \$ 150
Occupation RETIRED					
Employer					
First Name JAMES		Middle Name E		Contribution Received For:	
Last Name/Organization Name JOHNSTON				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General <input type="checkbox"/> Runoff (Local Elections Only)	
Address 1256 TWELVE STONE CRS				Amount of Contribution \$ 500	
City GOODLETTSVILLE	State TN	Zip Code 37072	Date of Contribution 11/24/2021		Aggregate This Election \$ 500
Occupation RETIRED					
Employer ED MEDICAL					
First Name WILLIAM		Middle Name C		Contribution Received For:	
Last Name/Organization Name HUDGINS				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General <input type="checkbox"/> Runoff (Local Elections Only)	
Address 1205 NASHVILLE PK				Amount of Contribution \$ 250	
City GALLATIN	State TN	Zip Code 37066	Date of Contribution 11/24/2021		Aggregate This Election \$ 250
Occupation RETIRED					
Employer					
First Name JOHN		Middle Name W		Contribution Received For:	
Last Name/Organization Name JONES				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General <input type="checkbox"/> Runoff (Local Elections Only)	
Address 1684 NOAH LN				Amount of Contribution \$ 1000	
City GALLATIN	State TN	Zip Code 37066	Date of Contribution 12/2/2021		Aggregate This Election \$ 1000
Occupation RETIRED JUDGE					
Employer SUMNER COUNTY					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional paged of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. Of summary.)					13600

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD			
				FROM: 11-01-21	TO: 01-15-22		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					AMOUNT 13600		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name DONALD		Middle Name C		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name TILL				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 2266 CAGES BEND RD				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 12/2/2021		Aggregate This Election \$ 250	
Occupation STEEL SALES							
Employer DOBRO STEEL CO							
First Name LOUIS & LINDA		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name OLIVER				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 110 BLUE RIDGE TRACE				<input type="checkbox"/> Runoff (Local Elections Only)			
City HENDERSONVILLE		State TN	Zip Code 37065	Date of Contribution 12/3/2021		Aggregate This Election \$ 250	
Occupation JUDGE							
Employer SUMNER COUNTY							
First Name RON		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name JONES				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 604 LILYCREST DR				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 12/3/2021		Aggregate This Election \$ 250	
Occupation BUILDER							
Employer RON JONES BUILDERS							
First Name EVAN		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name JONES				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 604 LILYCREST DR				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 12/3/2021		Aggregate This Election \$ 250	
Occupation BUILDER							
Employer RON JONES BUILDERS							
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.)					14600		

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<i>Carolyn Templeton for County Clerk</i>				FROM: 11-01-21		TO: 01-15-22	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)						AMOUNT 14600	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name KITTY		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name ARMSTRONG				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 200	
Address 1043 E NICHOLS CIR				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation PROPERTY MANAGEMENT				12/7/2021		\$ 200	
Employer SELFEMPLOYED							
First Name CAROLYN		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name MUNDY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 1707 ANDY JACKSON TRAIL				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation RETIRED				12/9/2021		\$ 250	
Employer							
First Name SMITH		Middle Name T		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name MARK				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 825 E MAIN ST				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation CLERK & MASTER				12/16/2021		\$ 250	
Employer SUMNER COUNTY							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name NEWTON NISSAN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 1461 NASHVILLE PIKE				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation AUTO DEALER				12/17/2021		\$ 250	
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS							
(Carry forward to item 3. of next page if additional paged of this form are used.)							
(If this is the last page of contributions, this amount must be shown in item 15b. Of summary.)						15560	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD			
				FROM: 11-01-21	TO: 01-15-22		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					AMOUNT 15550		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name BOBBY		Middle Name W		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name ATKINS				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 200	
Address 1212 ANDERSON RD				<input type="checkbox"/> Runoff (Local Elections Only)			
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution		Aggregate This Election	
Occupation RETIRED				12/20/2021		\$ 200	
Employer							
First Name TONY		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name GREGORY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 500	
Address 1371 ROZELLA WAY				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation BANK PRES.&CEO				12/28/2021		\$ 500	
Employer VOLUNTEER STATE BANK							
First Name PHILLIP		Middle Name C		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name KELLY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 125 PUBLIC SQUARE				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation ATTORNEY				12/31/2021		\$ 250	
Employer KELLY & SMITH							
First Name ROY		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name ALEXANDER				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 200	
Address 724 BAY BOINT DR				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution		Aggregate This Election	
Occupation SELF EMPLOYED				1/5/2022		\$ 200	
Employer GENERAL TIRE							
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional paged of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. Of summary.)					16700		

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<i>Carolyn Templeton for County Clerk</i>				FROM: 11-01-21	TO: 01-15-22		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)						AMOUNT 16700	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name HENRY		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name HOLLEMAN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 1305 S WATER AVE				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN	State TN	Zip Code 37066		Date of Contribution		Aggregate This Election	
Occupation AUTO DEALER				1/10/2022		\$ 250	
Employer G&H SELECT AUTO SALES							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name ECONOMY MINI STORAGE				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 400	
Address 174 AIRPORT RD				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN	State TN	Zip Code 37066		Date of Contribution		Aggregate This Election	
Occupation STORAGE				1/10/2022		\$ 400	
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name HOLLEMAN TRUCKING & EXC INC				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 256 E SCHELL ST				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN	State TN	Zip Code 37066		Date of Contribution		Aggregate This Election	
Occupation CONSTRUCTION				1/10/2022		\$ 250	
Employer							
First Name JIMMY		Middle Name L		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name ANDERSON				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General		\$ 250	
Address 335 BAY HILL DR				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN	State TN	Zip Code 37066		Date of Contribution		Aggregate This Election	
Occupation INSURANCE EXECUTIVE				1/10/2022		\$ 250	
Employer LEE RAINES INSURANCE							
5. TOTAL ITEMIZED CONTRIBUTIONS						17850	
(Carry forward to item 3. of next page if additional paged of this form are used.)							
(If this is the last page of contributions, this amount must be shown in item 15b. Of summary.)							

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD FROM: 11-01-2021 TO: 01-15-2022		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$0.00	
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 NONE		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<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: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<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: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<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: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<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: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<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.)					0	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD	
<i>Carolyn Templeton for County Clerk</i>			FROM: 11-01-21	TO: 01-15-22
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				AMOUNT -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 Name/Organization Name US POST OFFICE		STAMPS	\$ 200
Address MAPLE ST			
City GALLATIN	State TN		
Last Name/Organization Name			\$
Address			
City	State		
Last Name/Organization Name			\$
Address			
City	State		
Last Name/Organization Name			\$
Address			
City	State		
Last Name/Organization Name			\$
Address			
City	State		

5. TOTAL ITEMIZED EXPENDITURES			
(Carry forward to item 3. of next page if additional paged of this form are used.)			\$ 200.00
(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 Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD FROM: 11-01-2021 TO: 01-15-2022					
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 NONE									
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name				Address		Loan Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Date of Loan	
City		State	Zip Code						
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) (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.)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
				0		0	0	0	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Carolyn Templeton for County Clerk				2. REPORT COVERING THE PERIOD			
				FROM: 11-01-2021		TO: 01-15-2022	
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 NONE	Middle Name		0	0	0		
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	0	0	0	