



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

10-7-24  
 1. Date: 9-30-24 2.a. Candidate or Committee Name: Dustin Darnall  
 2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: 11-5-24  
 4. Campaign Address: 137 Brookview Cir  
 City: Millersville State: TN Zip Code: 37072 Phone: 615-425-6756  
 5. Candidate Home Address: 137 Brookview Cir  
 City: Millersville State: TN Zip Code: 37072 Phone: 615-425-6756  
 Candidate Email Address: dustin.darnall@gmail.com  
 6. Office Sought: (include district number, if applicable) City of Millersville Commissioner  
 7. Name of Political Treasurer (may be candidate): Caitlin Duke  
 Political Treasurer Email Address: cduke@tyleryork.com

8. Category or Report: (check one)  
 First Quarter  Second Quarter  Third Quarter  Fourth Quarter  Pre-Primary  Pre-General  
 Mid-Year Supplemental  Year-End Supplemental  Runoff Election

9. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24

10. Detailed Disclosure: (Check one)  
 This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)  
 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.

11. 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>10-7-24</u>		<u>10-7-24</u>
Candidate Signature	Date	Political Treasurer Signature	Date
	<u>07-Oct-2024</u>		<u>07-Oct-2024</u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report	<b>FILED</b>	\$	0
b. Total Receipts This Period	<b>OCT 9, 2024</b>	\$	2,900
c. Total Disbursements This Period		\$	695.87
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	<b>SUMNER COUNTY ELECTION COMMISSION</b>	\$	2,204.13
e. Total Loans Outstanding		\$	0
f. Total Obligations Outstanding		\$	1103.58

# SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Dustin Darnall

14. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 0  
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) ..... \$ 2900
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period..... \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... \$ 2,900

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 695.87  
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period ..... \$ 0
- c. Total Obligation Payments Made This Period..... \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 695.87

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period ..... \$ 0
- b. Itemized In-Kind Contributions Received This Period ..... \$ 1777.50
- c. Total In-Kind Contributions Received This Period ..... \$ 1777.50

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) ..... \$ 1163.58

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Dustin Darnall  
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Dustin Middle Name: \_\_\_\_\_ Last Name: Darnall  
Address: 137 Brookview Cir City: Millersville State: TN Zip Code: 37072  
Occupation: Regulatory Employer: Berry Global  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100 Date of Contribution: 7-31-24 Aggregate This Election: \$ 100

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Charlena Middle Name: \_\_\_\_\_ Last Name: Aumiller  
Address: 144 Huland City: Hendersonville State: TN Zip Code: 37075  
Occupation: Attorney Employer: LC Solutions  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500 Date of Contribution: 8-22-24 Aggregate This Election: \$ 500

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Ira Middle Name: \_\_\_\_\_ Last Name: Wade  
Address: 3128 Creekview Ln City: Millersville State: TN Zip Code: 37072  
Occupation: Business Owner Employer: Self Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50 Date of Contribution: 9-8-24 Aggregate This Election: \$ 50

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Mark Middle Name: Munter Last Name: Hagewood  
Address: 2112 Creek Trail City: Millersville State: TN Zip Code: 37072  
Occupation: Dir. of Ops for Research Computing Employer: Vanderbilt University  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500 Date of Contribution: 9-16-24 Aggregate This Election: \$ 500

Total Contributions: \$ 1150

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Dustin Darnall  
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,150

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kenneth Middle Name: \_\_\_\_\_ Last Name: Burd  
Address: 10 Vandywood Ct City: Hendersonville State: TN Zip Code: 37075  
Occupation: Self Employed Employer: Self Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500 Date of Contribution: 9-19-24 Aggregate This Election: \$ 500

Business or Organization Name: Shane Trucking and Excavating **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 895 Elm Hill Pike City: Nashville State: TN Zip Code: 37210  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500 Date of Contribution: 9-19-24 Aggregate This Election: \$ 500

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Cheryl Middle Name: \_\_\_\_\_ Last Name: Burton  
Address: 4201 Turners Bend City: Millersville State: TN Zip Code: 37072  
Occupation: Senior VP of Sales + Marketing Employer: AaSys  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 750 Date of Contribution: 9-28-24 Aggregate This Election: \$ 750

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ \_\_\_\_\_ Date of Contribution: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 2900

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Dustin Darnall  
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24  
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: Step **OR**  
First Name: Stephen Middle Name: \_\_\_\_\_ Last Name: Sebastian  
Address: 3621 Hemlock Park Dr. City: Kingsport State: TN Zip Code: 37643  
Occupation: Consultant Employer: The Ingram Group  
In-Kind Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
In-Kind Contribution Value: \$ 1500 In-Kind Contribution Date: 9-2-24 Aggregate This Election: \$ 1500  
Description of In-Kind Contribution: Consulting

Business or Organization Name: W Signs N Printing **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1411 South Dickerson Rd City: Leondlettsville State: TN Zip Code: 37072  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
In-Kind Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
In-Kind Contribution Value: \$ 262.50 In-Kind Contribution Date: 9-27-24 Aggregate This Election: \$ 262.50  
Description of In-Kind Contribution: Signs

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Laura Middle Name: \_\_\_\_\_ Last Name: Darnall  
Address: 137 Brookview Cir City: Millersville State: TN Zip Code: 37072  
Occupation: Educational Project Director Employer: Digital Promise  
In-Kind Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
In-Kind Contribution Value: \$ 15 In-Kind Contribution Date: 9-25-24 Aggregate This Election: \$ 15  
Description of In-Kind Contribution: T-Shirt

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
In-Kind Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
In-Kind Contribution Value: \$ \_\_\_\_\_ In-Kind Contribution Date: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_  
Description of In-Kind Contribution: \_\_\_\_\_

Total In-Kind Contributions: \$ 1777.50

(Carry forward to the 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 the summary on first page.)

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Dustin Darnall
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Farmers Bank OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 1250 Louisville Hwy City: Millersville State: TN Zip Code: 37072

Purpose of Expenditure: Service Charge

Amount of Expenditure: \$ 5 Date of Expenditure: \$ 9-13-24

Business or Organization Name: Ink'n Screens LLC OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 259 Hwy 81W Suite 3 City: White House State: TN Zip Code: 37188

Purpose of Expenditure: Signs, Banners, Stakes

Amount of Expenditure: \$ 690.87 Date of Expenditure: \$ 9-18-24

Business or Organization Name: \_\_\_\_\_ OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Expenditure: \_\_\_\_\_

Amount of Expenditure: \$ \_\_\_\_\_ Date of Expenditure: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Expenditure: \_\_\_\_\_

Amount of Expenditure: \$ \_\_\_\_\_ Date of Expenditure: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Expenditure: \_\_\_\_\_

Amount of Expenditure: \$ \_\_\_\_\_ Date of Expenditure: \$ \_\_\_\_\_

Total Expenditures: \$ 695.87

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Dustin Darnall
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: \_\_\_\_\_ OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Outstanding Loan Balance (Beginning) ..... \$ \_\_\_\_\_

Loans Received ..... \$ \_\_\_\_\_

Loan Payments ..... \$ \_\_\_\_\_

Outstanding Loan (End)..... \$ \_\_\_\_\_

Loan Received For:  Primary Election  General Election  Runoff (Local Elections Only)

Date of Loan: \_\_\_\_\_

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: \_\_\_\_\_ OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

**Totals for all loans** (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans.)

Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) ..... \$ 0

Loans Received ..... \$ 0

Loan Payments ..... \$ 0

Outstanding Loan (End)..... \$ 0

# ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Dustin Darnall
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: Shell Miller Sebastian Advertising  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_  
 Address: 4014 N. Roan St  
 City: Johnson City  
 State: TN Zip Code: 37601

Description of Obligation: <u>Mailer + Postage</u>			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 0	\$ 436.91	\$ 0	\$ 436.91

Business Name: Shell Miller Sebastian Advertising  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_  
 Address: 4014 N. Roan St  
 City: Johnson City  
 State: TN Zip Code: 37601

Description of Obligation: <u>Consulting, <del>copywriting</del> Copywriting Design Services</u>			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 0	\$ 666.67	\$ 0	\$ 666.67

Business Name: \_\_\_\_\_  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: \_\_\_\_\_  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

**TOTALS**

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 0	\$ 1103.58	\$ 0	\$ 1103.58