



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees OCT X 8 2024

1. Date: 10/03/2024 2.a. Candidate or Committee Nar	ne:James Lincoln Atwood#LECTION COUNTY 3. Election Date:
2.b. If Committee, Name of Candidate:	3. Election Date: 4/10/05/2024
4. Campaign Address: <u>1075 Ridgecrest Drive</u>	
City: Millersville State: TN	Zip Code: <u>37072</u> Phone: <u>615-829-6172</u>
5. Candidate Home Address: 1075 Ridgecrest Drive	
City: Millersville State: TN	Zip Code: <u>37072</u> Phone: <u>615-829-6172</u>
Candidate Email Address: lincoln@myatwoods.org	
6. Office Sought: (include district number, if applicable) _C	ty of Millersville Commissioner
7. Name of Political Treasurer (may be candidate): James I	Lincoln Atwood III
Political Treasurer Email Address: lincoln@myatwoods.or	
8. Category or Report: (check one)	
☐ First Quarter ☐ Second Quarter ☒ Third Quarte	r Fourth Quarter Pre-Primary Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental	
9. Reporting Period: Start Date: 07/01/2024	End Date: 09/30/2024
10. Detailed Disclosure: (Check one)	
	ecause contributions (including in-kind) received total \$1,000 reporting period. (Complete items 12.d., 12.e., and 12.f.)
	lisclosure because contributions (including in-kind) received
and that this report is an accurate accounting of campa by the candidate committee by the Campaign Finance	7 1 -
12. Summary:	
a. Balance On Hand Last Report	\$ <u>0.00</u>
b. Total Receipts This Period	
c. Total Disbursements This Period	
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	
e. Total Loans Outstanding	
f. Total Obligations Outstanding	\$ <u>1103.58</u>

SUMMARY PAGE - CANDIDATE

13. Name of Cand	idate or Committee: _James Lincolr	n Atwood III
14. Reporting Per	od: Start Date: 07/01/2024	End Date: 09/30/2024
15. Receipts:		
a. Unitemize (Note: Effec	d Contributions (\$100 or less from ive January 16, 2023, Unitemized Contribu	each source this period) \$
b. Itemized	Contributions (over \$100 from each	source this period) \$ 2250.00
c. Loans Rec	eived This Reporting Period	\$ <u>0.00</u>
d. Interest R	eceived This Reporting Period	\$ 0.00
e. Total Rece	ipts (add 15.a., 15.b., 15.c., and 15.d.) (mus	st be shown in item 12.b.) \$ _2250.00
16. Disbursement	5:	
	enditures (other than loan payment ive January 16, 2023, all expenditures mus	ts)
b. Loan Rep	yments Made This Period	\$ 0.00
c. Total Obli	gation Payments Made This Period.	\$ 0.00
d. Total Disb	ursements (add 16.a. and 16.b.) (must be	e shown in item 12.c.)\$ 690.88
17. In-Kind Contri	outions:	
a. Unitemize	d In-Kind Contributions Received T	This Period \$ 0.00
b. Itemized	n-Kind Contributions Received This	s Period \$ 1500.00
		riod \$ <u>1500.00</u>
18. Obligations:		
a. Total Obli	gations Outstanding (must be shown i	in item 12.f.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: James Lincoln Atwood III	
2. Reporting Period: Start Date: <u>07/01/2024</u> End Date: <u>09/30/2024</u>	
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: <u>James</u> Middle Name: <u>Lincoln</u> Last Name: <u>Atwood III</u>	
Address: 1075 Ridgecrest Drive City: Millersville State: TN Zip Code: 37072	
Occupation: <u>Director, Data Center Operations</u> Employer: <u>RevSpring, Inc</u>	
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	
Amount of Contribution: \$500.00 Date of Contribution: 09/11/2024 Aggregate This Election: \$500.00	
Business or Organization Name: Nationwide Spray Foam	OR
First Name: Middle Name: Last Name:	
Address: 124 Volunteer Drive City: Hendersonville State: TN Zip Code: 37075	
Occupation: Employer:	
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	
Amount of Contribution: \$500.00 Date of Contribution: 09/11/2024 Aggregate This Election: \$500.00	
Business or Organization Name: Shane Trucking & Excavating, Inc.	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: \$500.00 Date of Contribution: 09/19/2024 Aggregate This Election: \$500.00	
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: Business Owner Employer: Retired	
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	
Amount of Contribution: $$500.00$ Date of Contribution: $09/19/2024$ Aggregate This Election: $$500.00$	
Total Contributions: \$ 2000.00 (Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, the amount must be shown in the summary on first page.)	nis

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

Candidate or Committee N	lame: James Lincoln Atwood III		
	ate: <u>07/01/2024</u> End Date: <u>09/30/2024</u>		
	ons from preceding page (enter \$0 if first page) \$	Transaction of	
COMPLETE THE APPROPRIAT	E ITEMS FOR EACH ITEMIZED CONTRIBUTION.		
Business or Organization Nar	ne:		OR
First Name: Cheryl	Middle Name:	Last Name: Buntin	
Address: 4201 Turners Ben	d City: Millersville	State: <u>TN</u> Zip Code: <u>37072</u>	
Occupation: Senior VP of S	sales & Marketing Employer: AaSys		
Contribution Received For:	☐ Primary Election	☐ Runoff (Local Elections Only)	
Amount of Contribution: \$25	50.00 Date of Contribution: <u>09/28/2024</u>	Aggregate This Election: \$ 250.00	
Business or Organization Nar	me:		OR
	Middle Name:		
	City:		
	Employer:		
Contribution Received For:	☐ Primary Election ☐ General Election	Runoff (Local Elections Only)	
	Date of Contribution:		
Business or Organization Nar	me:		OR
	Middle Name:		
Address:	City:	State: Zip Code:	
	Employer:		
	☐ Primary Election ☐ General Election		
Amount of Contribution: \$	Date of Contribution:	Aggregate This Election: \$	
Business or Organization Nar	ne:		OR
First Name:	Middle Name:		
	City:		
Occupation:	Employer:		
Contribution Received For:	☐ Primary Election ☐ General Election	Runoff (Local Elections Only)	
Amount of Contribution: \$	Date of Contribution:	Aggregate This Election: \$	
	0.00 page if additional pages of this form are used. If t	his is the last page of contributions, t	his

SS-1131 (Rev. 1/2023)

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Ja	mes Lincoln Atwood I	II		
2. Reporting Period: Start Date: <u>07/</u>				
3. Total in-kind contributions from pro				
COMPLETE THE APPROPRIATE ITEMS F dollars (\$100) from any contributor during the	OR EACH IN-KIND CONT	RIBUTION. In-kind contri	butions totaling more than one hund	dred
Business or Organization Name:				OR
First Name: Stephen				
Address: 3621 Hemlock Park Drive				
Occupation: Consultant	Employe	er: The Ingram Group		
In-Kind Contribution Received For:	☐ Primary Election	☑ General Election	Runoff (Local Elections O	nly)
In-Kind Contribution Value: $$1500.00$	_ In-Kind Contribution	Date: 09/02/2024 Agg	regate This Election: \$ 1500.00)
Description of In-Kind Contribution:	Consulting		277	
Business or Organization Name:				OR
First Name:				
Address:				
Occupation:				
In-Kind Contribution Received For:				
In-Kind Contribution Value: \$				
Description of In-Kind Contribution:				
Business or Organization Name:			All the control of th	
First Name:				
Address:				
Occupation:				
In-Kind Contribution Received For:				nly)
In-Kind Contribution Value: \$	_ In-Kind Contribution	Date: Agg	regate This Election: \$	2.4
Description of In-Kind Contribution:				
Business or Organization Name:				
First Name:				
Address:				
Occupation:				
In-Kind Contribution Received For:				
In-Kind Contribution Value: \$				1.5
Description of In-Kind Contribution:				
Tabella Kind Contribution & 1500.0	0			-
Total In-Kind Contributions: \$ 1500.0 (Carry forward to the next page if add		n are used If this is the	last nage of in-kind	
contributions, this amount must be sh			iast page of ill-fillid	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: <u>Ja</u>	mes Lincol	n Atwood III				
2. Reporting Period: Start Date: 07/	01/2024	End Date: <u>09/30/2024</u>	or and the second			
3. Total campaign expenditures from	preceding p	age (enter \$0 if first page) \$	0			
COMPLETE THE APPROPRIATE ITEMS kind contribution to a candidate, please reme candidate's name in the purpose of the experi	mber to includ	le the purpose of the expenditure	s must be itemized e.g., postage, printi	If the expen- ng, etc.) along	diture is ar with the	n in-
Business or Organization Name: Ink	'n Screens I	LC				OR
First Name:	Middle	Name:	Last Name:			
Address: 259 Hwy 31W Suite 3		City: White House	State: TN	Zip Code:	37188	
Purpose of Expenditure: Signs, Bans	ners, and St	akes				
Amount of Expenditure: \$ 690.88		Date of Expenditure: 09/	18/2024			
Business or Organization Name:						OR
First Name:						
Address:		City:	State:	Zip Code:		
Purpose of Expenditure:			entre les			
Amount of Expenditure: \$		Date of Expenditure:				
Business or Organization Name:						OR
First Name:						
Address:						
Purpose of Expenditure:						
Amount of Expenditure: \$		Date of Expenditure:				
Business or Organization Name:						OR
First Name:	Middle	Name:	Last Name:		440	
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: \$ 690.88					William School Soom	
(Carry forward to the next page if add			is the last page	of expendi	tures, thi	is
amount must be shown in the summa	ary on first p	age.)				

SS-1129 (Rev. 1/2023)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Jan	nes Lincol	n Atwood III				
2. Reporting Period: Start Date: 07/0	1/2024	End Date: 09/3	30/2024	_		
3. Complete the appropriate items for	each loar	totaling more tha	n one hund	lred dollars	(\$100).	
Complete the following for the source of each	h loan recei	ved and/or outstandin	g during the p	period.		
Business or Organization Name:						OR
First Name:	_Middle N	Name:	L	ast Name: _		
Address:		_City:		State:	Zip Code:	1-1-
Outstanding Loan Balance (Beginning)		\$				
Loans Received		\$				
Loan Payments		\$	1 A 135 W			
Outstanding Loan (End)		\$				
Loan Received For: Primary Elect	tion [General Election	Runof	f (Local Elect	ions Only)	
List all endorsers or guarantors for above loa	n (If more s	pace is needed, please	attach additi	onal pages.)		
Business or Organization Name:					x	OR
First Name:	Middle	Name:		Last Name:	,	
Address:		_City:		State:	Zip Code:	
Amount Guaranteed Outstanding: \$						
Business or Organization Name:						OR
First Name:						
Address:				State:	_ Zip Code:	
Amount Guaranteed Outstanding: \$						
Business or Organization Name:						OR
First Name:	_ Middle	Name:		Last Name	2:	
Address:					_ Zip Code:	
Amount Guaranteed Outstanding: \$						
Business or Organization Name:	-47					OR
First Name:						
Address:		_City:		State:	Zip Code:	
Amount Guaranteed Outstanding: \$						
Totals for all loans (Complete this page for Total loans received and loan payments should be a shou	each outsta be shown or	anding loan during the p a summary page. Outsta	eriod. Comple nding loan bal	ete this section lance should be	only on last page of	loans. ge.)
Balance (Beginning)						
Loans Received						
Loan Payments						
Outstanding Loan (End)		\$_0				

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: James Lincoln Atwood I	11			
2. Reporting Period: Start Date: 07/01/2024 End Da	te: <u>09/30/2024</u>			
3. Complete the appropriate items for each obligation owed to	a person/vendor at ti	he end of the r	eporting period	d.
Business Name: Shell & Miller Advertising First Name: Middle Name: Last Name:	Obligation:	Direct Mail #1 - Joint Ticket		
Address: 4014 North Roan Street City: Johnson City	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
State: TN Zip Code: 37601	\$ 0	\$ 436.91	\$ 0	\$ 436.91
Business Name: Shell & Miller Advertising First Name: Middle Name: Last Name:	Description of Obligation:			
Address: 4014 North Roan Street City: Johnson City	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
State: TN Zip Code: 37601	\$ 0	\$ 666.67	\$ 0	\$ 666.67
Business Name: Middle Name: Last Name: Address:		Debt Incurred	Payments This Period	Outstanding Balance
City:	Beginning)	This Period		(Period End)
State: Zip Code:	\$	\$	\$	\$
Business Name: Middle Name: Last Name:	Description of Obligation:			
Address:	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
State: Zip Code:	\$	\$	\$	\$
	_			
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	Outstanding Balance (Period Beginning) \$ 0	Debt Incurred \$ 1103.58	Payments This Period	Outstanding Balance (Period End) \$ 1103.58
must also be shown on the summary on first page.)				1