

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 7/5/2018		2.a. NAME OF CANDIDATE OR COMMITTEE Mark A. Vance		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE 8/2/2018		
4.a. CAMPAIGN ADDRESS AND PHONE				
Street or Rural Route 201 Blue Ridge Dr.	City Bristol	State TN	Zip Code 37620	Phone (423) 914-8557
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)				
Street or Rural Route 201 Blueridge Drive	City Bristol	State TN	Zip Code 37620	Phone (423) 914-8557
5. OFFICE SOUGHT (include district number, if applicable) COUNTY COMMISSION		6. NAME OF POLITICAL TREASURER (may be candidate) Mark Vance		
7. CATEGORY OR REPORT (Check one)				
☐ FIRST QUARTER	☒ SECOND QUARTER	☐ THIRD QUARTER	☐ FOURTH QUARTER	☐ PRE- PRIMARY
				☐ PRE- GENERAL
				☐ MID-YEAR SUPPLEMENTAL
				☐ YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD 4/22/2018		8.b. ENDING DATE OF REPORTING PERIOD 6/30/2018		
9. (Check one)				
a. ☐ 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. ☒ 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.				
_____ signature of candidate		_____ signature of political treasurer		
_____ signature of witness		_____ signature of witness		
_____ date		_____ date		
11. WITNESS SIGNATURE				
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT		\$ <u>2,646.55</u>		
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>900.34</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>890.18</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>2,656.71</u>		
e. TOTAL LOANS OUTSTANDING		\$ <u>0.00</u>		
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>878.29</u>		



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Mark A. Vance	14. REPORT COVERING THE PERIOD FROM: 4/22/2018 TO: 6/30/2018	
--	---	--

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period)	\$ 300.00
b. Itemized Contributions (over \$100 from each source this period)	\$ 600.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 900.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0.00

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0.34

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 900.34

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) \$ 0.00

b. Itemized Expenditures (Over \$100 each payee this period) \$ 890.18

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 890.18

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0.00

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 890.18

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ 0.00
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ 0.00
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ 0.00

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each)	\$ 0.00
b. Itemized Obligations Outstanding (Over \$100 each)	\$ 878.29
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)	\$ 878.29



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Mark A. Vance				2. REPORT COVERING THE PERIOD FROM: 4/22/2018 TO: 6/30/2018			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$0.00		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name Donna		Middle Name		Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)		Amount of Contribution \$200.00	
Last Name/Organization Name Davenport							
Address 329 Rosedale Ln							
City bristol		State TN		Zip Code 37620		Date of Contribution 06/12/18	Aggregate This Election \$200.00
Occupation retired							
Employer							
First Name Greater Kingsport Republican		Middle Name		Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)		Amount of Contribution \$200.00	
Last Name/Organization Name GKRW							
Address P.O.BOX 7343							
City Kingsport		State TN		Zip Code 37664		Date of Contribution 06/04/18	Aggregate This Election \$200.00
Occupation							
Employer							
First Name Donna		Middle Name		Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)		Amount of Contribution \$200.00	
Last Name/Organization Name Davenport							
Address 329 Rosedale Lane							
City Bristol		State TN		Zip Code 37620		Date of Contribution 06/01/18	Aggregate This Election \$200.00
Occupation Retired							
Employer							
First Name		Middle Name		Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		Amount of Contribution	
Last Name/Organization Name							
Address							
City		State		Zip Code		Date of Contribution	Aggregate This Election
Occupation							
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.)					\$600.00		



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Mark A. Vance			2. REPORT COVERING THE PERIOD FROM: 4/22/2018 TO: 6/30/2018	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$0.00
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 Reagan Dinner		Tickets		\$125.00
Address MERMAN ROAD				
City Kinasport	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Strategic Placement		yard signs		\$415.18
Address highway 75				
City Blountville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Sullivan County Republican Party		Advertisement		\$200.00
Address merman road				
City Kingsport	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Avoca Fire Dept		advertisement		\$150.00
Address 183 Beaver Creek Road				
City Bluff City	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
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.)				\$890.18



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Mark A. Vance			2. REPORT COVERING THE PERIOD FROM: 4/22/2018 TO: 6/30/2018			
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 Mail Works	Middle Name		\$878.29	\$878.29	\$0.00	\$878.29
Last Name/Business Name Mail Works						
Address 320 Wesley Street						
City Johnson City	State TN	Zip Code 37601				
Description of Obligation Mailer						
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						
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.)			\$878.29	\$878.29	\$0.00	\$878.29

