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CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

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1. DATE OF REPORT <u>07/05/2022</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Donna McDonald-Martin Election Campaign</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Donna McDonald-Martin</u>		3. ELECTION DATE <u>08/04/2022</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>P.O. Box 342744</u> <u>Bartlett</u> <u>TN</u> <u>38134</u> <u>(601)262-3266</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>7031 Debra Cove E</u> <u>Memphis</u> <u>TN</u> <u>38133</u> <u>(901)262-3266</u>			
5. OFFICE SOUGHT (include district number, if applicable) <u>County Commissioner District 1</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Donna McDonald-Martin</u>	
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input checked="" 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 type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>04/24/2022</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>06/30/2022</u>	
9. (Check one) a. <input checked="" 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 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>Donna McDonald-Martin</u> <u>07/06/22</u> <u>Donna McDonald-Martin</u> <u>07/06/22</u> signature of candidate date signature of political treasurer date			
11. WITNESS SIGNATURE <u>[Signature]</u> <u>07/06/22</u> <u>[Signature]</u> <u>07/06/22</u> signature of witness date signature of witness date			
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>287.48</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>725.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>593.00</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>419.48</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>0</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <i>Donna McDonald-Martin Election Campaign</i>	14. REPORT COVERING THE PERIOD FROM: <i>04/24/22</i> TO: <i>06/30/22</i>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>575⁰⁰</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>150⁰⁰</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>725⁰⁰</u>

16. LOANS RECEIVED THIS REPORTING PERIOD

17. INTEREST RECEIVED THIS REPORTING PERIOD

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

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)

Gasoline	\$
printing	\$ <u>298.74</u>
postage	\$ <u>11.60</u>
Campaign webs. & Domain	\$ <u>184.25</u>
Gasoline	\$ <u>80.15</u>
Bank fees	\$ <u>7.00</u>
Act Blue Donate	\$ <u>11.26</u>
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee)

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

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

20. LOAN REPAYMENTS MADE THIS PERIOD

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

22. IN-KIND CONTRIBUTIONS

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

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each)	\$ <u>Ø</u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>Ø</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.)	\$ <u>Ø</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna McDonald Martin Election Campaign</i>				2. REPORT COVERING THE PERIOD FROM <i>07/24/22</i> TO <i>06/30/22</i>			
				Amount <i>0</i>			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)							
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name <i>Gwen to Maury</i>		Middle Name		Contribution Received For:			
Last Name/Organization Name <i>Maury</i>				<input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)			
Address <i>16 Reed Avenue</i>				Date of Contribution <i>04/24/2022</i>			
City <i>Louisville</i>		State <i>MS</i>	Zip Code <i>39339</i>			Aggregate This Election <i>\$100.00</i>	
Occupation <i>manager</i>							
Employer <i>Walmart Corp</i>							
First Name <i>Valerie</i>		Middle Name		Contribution Received For:			
Last Name/Organization Name <i>Murphy</i>				<input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)			
Address <i>7597 Greystone Oaks Ave</i>				Date of Contribution <i>04/24/2022</i>			
City <i>Arlington</i>		State <i>TN</i>	Zip Code <i>38002</i>			Aggregate This Election <i>\$25.00</i>	
Occupation <i>Unical Systems Manager</i>							
Employer <i>MLH</i>							
First Name <i>Patricia</i>		Middle Name		Contribution Received For:			
Last Name/Organization Name <i>Bell</i>				<input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)			
Address <i>532 Major Brown Road</i>				Date of Contribution <i>04/25/22</i>			
City <i>Louisville</i>		State <i>MS</i>	Zip Code <i>39339</i>			Aggregate This Election <i>\$25.00</i>	
Occupation <i>Office Assistant</i>							
Employer <i>St Albans Health</i>							
First Name <i>Maria</i>		Middle Name		Contribution Received For:			
Last Name/Organization Name <i>Hardaway</i>				<input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)			
Address <i>50 Amesbury Cove</i>				Date of Contribution <i>04/26/22</i>			
City <i>EADS</i>		State <i>TN</i>	Zip Code <i>38028</i>			Aggregate This Election <i>\$25.00</i>	
Occupation <i>Director IT</i>							
Employer <i>MLH</i>							
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.)					<i>\$175.00</i>		

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna McDonald - Mayor Election Campaign</i>				2. REPORT COVERING THE PERIOD FROM: <i>09/24/22</i> TO: <i>06/30/23</i> Amount: <i>0</i>			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)							
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		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution	
Occupation		Employer		Description of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution	
Occupation		Employer		Description of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution	
Occupation		Employer		Description of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution	
Occupation		Employer		Description of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution	
Occupation		Employer		Description of In-Kind Contribution		Aggregate this Election	
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.)							

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna McDonald Martin Election Campaign</i>		2. REPORT COVERING THE PERIOD FROM: <i>04/24/22</i> TO: <i>06/30/22</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount: <i>\$175.00</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name: <i>Shirley</i>		Middle Name:	
Last Name/Organization Name: <i>Jackson-Gordon</i>		Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address: <i>409 N Taft Ave</i>		Amount of Contribution: <i>\$150.00</i>	
City: <i>Hillside</i>	State: <i>IL</i>	Zip Code: <i>60162</i>	Date of Contribution: <i>04/27/22</i>
Occupation: <i>Event Planner</i>		Aggregate This Election: <i>\$150.00</i>	
Employer: <i>Hotel Serv</i>			
First Name: <i>Juliet</i>		Middle Name:	
Last Name/Organization Name: <i>Johnson</i>		Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address: <i>6634 May Springs Dr</i>		Amount of Contribution: <i>\$50.00</i>	
City: <i>Memphis</i>	State: <i>TN</i>	Zip Code: <i>38142</i>	Date of Contribution: <i>04/30/22</i>
Occupation: <i>Systems Analyst</i>		Aggregate This Election: <i>\$50.00</i>	
Employer: <i>MLH</i>			
First Name: <i>Monica</i>		Middle Name:	
Last Name/Organization Name: <i>Bowser</i>		Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address: <i>2702 Austin James Dr</i>		Amount of Contribution: <i>\$100.00</i>	
City: <i>Southaven</i>	State: <i>MS</i>	Zip Code: <i>38672</i>	Date of Contribution: <i>05/03/22</i>
Occupation: <i>Systems Analyst</i>		Aggregate This Election: <i>\$100.00</i>	
Employer: <i>MLH</i>			
First Name: <i>Arclithia</i>		Middle Name:	
Last Name/Organization Name: <i>Woodland</i>		Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address: <i>1176 Black Sheep Dr</i>		Amount of Contribution: <i>\$50.00</i>	
City: <i>Arlington</i>	State: <i>TN</i>	Zip Code: <i>38002</i>	Date of Contribution: <i>05/03/22</i>
Occupation: <i>Systems Analyst</i>		Aggregate This Election: <i>\$50.00</i>	
Employer: <i>MLH</i>			
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.)			<i>\$525.00</i>

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna McDonald - 11th Election Campaign</i>				2. REPORT COVERING THE PERIOD FROM: <i>04/29/22</i> TO: <i>06/30/22</i>			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>		
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		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
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.)							

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Don McDonald-Martin Election Campaign</i>			2. REPORT COVERING THE PERIOD FROM: <i>04/21/22</i> TO: <i>06/30/22</i>		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>\$525⁰⁰</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Ethelean</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Jordan</i>		Address <i>1310 Bethel Road</i>		<input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Louisville</i>		State <i>MS</i>		Zip Code <i>39339</i>	
Occupation <i>Office Administrator</i>		Employer <i>Beck's Funeral Home</i>		Date of Contribution <i>05/04/22</i>	
				Amount of Contribution <i>\$50⁰⁰</i>	
				Aggregate This Election <i>\$50⁰⁰</i>	
First Name <i>Paella</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Davis</i>		Address <i>5303 Caprock Dr.</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Pearland</i>		State <i>TX</i>		Zip Code <i>77584</i>	
Occupation <i>Lab Tech</i>		Employer <i>City of Houston Water Div.</i>		Date of Contribution <i>05/06/22</i>	
				Amount of Contribution <i>\$100⁰⁰</i>	
				Aggregate This Election <i>\$100⁰⁰</i>	
First Name <i>Stephanie #</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Harrell</i>		Address <i>139 Wind Breeze Dr</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <i>Memphis</i>		State <i>TN</i>		Zip Code <i>38109</i>	
Occupation <i>Project Manager</i>		Employer <i>MLH IT Div.</i>		Date of Contribution <i>05/11/22</i>	
				Amount of Contribution <i>\$50⁰⁰</i>	
				Aggregate This Election <i>\$50⁰⁰</i>	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Zip Code	
Occupation		Employer		Date of Contribution	
				Amount of Contribution	
				Aggregate This Election	
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.)					<i>\$725⁰⁰</i>

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna McDonald Martin Election Campaign</i>				2. REPORT COVERING THE PERIOD		
				FROM: <i>05/21/22</i>	TO: <i>06/30/22</i>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>0</i>		
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		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
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.)						

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna McDonald Martin Election Campaign</i>			2. REPORT COVERING THE PERIOD FROM <i>04/24/22</i> TO <i>06/30/22</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>0</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name <i>GO DADDY</i>	Middle Name	Purpose of Expenditure <i>Campaign Website Domain Management</i>		Amount of Expenditure <i>\$184.25</i>
Last Name/Business Name <i>GO DADDY.com Website/Domain</i>				
Address <i>480-5058855 AZ 85284 0930</i>				
City <i></i>	State <i>AZ</i>			
First Name <i>Shell Gas Station</i>	Middle Name	Purpose of Expenditure <i>Campaign Gasoline Canvassing</i>		Amount of Expenditure <i>\$20.07</i>
Last Name/Business Name <i>Shell Oil 12761 5542</i>				
Address				
City <i>LAKELAND TN</i>	State <i>TN</i>			
First Name <i>Shell Gas Station</i>	Middle Name	Purpose of Expenditure <i>Campaign Gasoline</i>		Amount of Expenditure <i>\$30.01</i>
Last Name/Business Name <i>Shell Oil 10004 5542</i>				
Address				
City <i>Memphis</i>	State <i>TN</i>			
First Name <i>ACT+BLUE Donate</i>	Middle Name	Purpose of Expenditure <i>ACT+BLUE FEES</i>		Amount of Expenditure <i>\$6.01</i>
Last Name/Business Name				
Address				
City	State			
First Name <i>US Postal Service</i>	Middle Name	Purpose of Expenditure <i>Postage Stamps Campaign</i>		Amount of Expenditure <i>\$11.60</i>
Last Name/Business Name <i>USPS KIDSK 479 9402</i>				
Address				
City <i>Memphis</i>	State <i>TN</i>			
First Name <i>Vista print 2741</i>	Middle Name	Purpose of Expenditure <i>Pushcards Campaign</i>		Amount of Expenditure <i>\$134.11</i>
Last Name/Business Name <i>866-207-4955</i>				
Address				
City	State <i>MA</i>			
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.)				<i>\$386.05</i>

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Domo McDonald - Mayor Election Campaign</i>	2. REPORT COVERING THE PERIOD FROM: <i>04/24/22</i> TO: <i>06/30/22</i>
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					
First Name	Middle Name	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
Last Name/Organization Name		Loan Received For:		Date of Loan	
Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
City	State	Zip Code	<input type="checkbox"/> Runoff (Local Elections Only)		

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	City	State
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	City	State
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	City	State
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	City	State
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)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Donna McDonald - Martin Gleason Campaign			2. REPORT COVERING THE PERIOD FROM: 04/24/22 TO: 06/30/22		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount: \$386.05		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name Signs First 7333		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			Campaign yard signs		\$164.63
Address Kirby Whitten					
City Memphis		State TN	Zip Code 38134		
First Name Regions Bank		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			BANK FEES		\$7.00
Address Stage Road					
City		State	Zip Code		
First Name ACT Blue Donato		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			DONATE FEES		\$5.25
Address					
City		State	Zip Code		
First Name Shell Gas Station		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Shell Oil 12761 5542			Campaign Gasoline		\$30.07
Address					
City Lakeland		State TN	Zip Code 38002		
First Name		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
First Name		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
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.)				\$593.00	

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Lynn McDonald Martin Election Campaign</i>			2. REPORT COVERING THE PERIOD			
			FROM:		TO:	
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		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.)						

