



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 10/10/2023 2.a. Candidate or Committee Name: Michele Vetter
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/3/2023
4. Campaign Address: 3728 Priest Lake Drive
City: nashville State: TN Zip Code: 37217 Phone: _____
5. Candidate Home Address: 3728 Priest Lake Drive
City: Nashville State: TN Zip Code: 37217 Phone: _____
Candidate Email Address: mvetterd29@gmail.com
6. Office Sought: (include district number, if applicable) Council District 29
7. Name of Political Treasurer (may be candidate): Lisa Sarauw-Lugo
Political Treasurer Email Address: lisasarauwlugo@gmail.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: 7/28/2023 End Date: 9/30/2023
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.

Candidate Signature _____ Date _____ Political Treasurer Signature _____ Date _____
Witness Signature _____ Date _____ Witness Signature _____ Date _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$568.09</u>
b. Total Receipts This Period	\$ <u>\$314.00</u>
c. Total Disbursements This Period	\$ <u>\$879.54</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$2.55</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Michele Vetter

14. Reporting Period: Start Date: 7/28/2023 End Date: 9/30/2023

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(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) \$ \$314.00
- c. Loans Received This Reporting Period..... \$ _____
- d. Interest Received This Reporting Period \$ _____
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$314.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$879.54
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$879.54

17. In-Kind Contributions:

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

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Michele Vetter
2. Reporting Period: Start Date: 7/28/2023 End Date: 9/30/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Kar Middle Name: _____ Last Name: Volk
Address: 17080 NE 37th Ct City: Citra State: FL Zip Code: 32113
Occupation: Disabled Employer: Disabled
Contribution Received For: Primary Election ☒ General Election ☐ Runoff (Local Elections Only) ☐
Amount of Contribution: \$ \$200.00 Date of Contribution: 7/28/2023 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Shelby Jean Middle Name: _____ Last Name: Fowler
Address: 2845 Lera Jones Dr City: Antioch State: TN Zip Code: 37013
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election ☒ General Election ☐ Runoff (Local Elections Only) ☐
Amount of Contribution: \$ \$98.00 Date of Contribution: 8/1/2023 Aggregate This Election: \$ \$98.00

Business or Organization Name: Deal's/Truist **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2503 Lebanon Pike City: Nashville State: TN Zip Code: 37214
Occupation: Credit/bank Employer: Credit/bank
Contribution Received For: Primary Election ☒ General Election ☐ Runoff (Local Elections Only) ☐
Amount of Contribution: \$ \$16.00 Date of Contribution: 8/15/2023 Aggregate This Election: \$ \$16.00

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: \$ \$314.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Michele Vetter
2. Reporting Period: Start Date: 7/28/2023 End Date: 9/30/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

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: Sam's Club OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1300 Antioch Pike City: Nashville State: TN Zip Code: 37211

Purpose of Expenditure: Refreshments for Pop up

Amount of Expenditure: \$ \$103.80 Date of Expenditure: \$ 7/28/2023

Business or Organization Name: Kwik Stop OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2821 Smith Springs Rd City: Nashville State: TN Zip Code: 37217

Purpose of Expenditure: Ice

Amount of Expenditure: \$ \$5.00 Date of Expenditure: \$ 7/29/2023

Business or Organization Name: Shell OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2813 Smith Springs Rd City: Nashville State: TN Zip Code: 37217

Purpose of Expenditure: ice

Amount of Expenditure: \$ \$5.00 Date of Expenditure: \$ 7/29/2023

Business or Organization Name: Whitt's Barbecue OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1767 N. Mt. Juliet Rd City: Mt. Juliette State: TN Zip Code: 37122

Purpose of Expenditure: Team Meeting

Amount of Expenditure: \$ \$18.00 Date of Expenditure: \$ 7/31/2023

Business or Organization Name: Political Marketing Int'l, - PMI OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 4415-C Constitution Lane #166 City: Marianna State: FL Zip Code: 32447

Purpose of Expenditure: Text / Voicemail Service

Amount of Expenditure: \$ \$529.00 Date of Expenditure: \$ 8/2/2023

Total Expenditures: \$ \$660.80

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Michele Vetter
2. Reporting Period: Start Date: 7/28/2023 End Date: 9/30/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$660.80

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: Yelp Inc **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: Online City: San Francisco State: CA Zip Code: 94105

Purpose of Expenditure: Campaign

Amount of Expenditure: \$ \$32.40 Date of Expenditure: \$ 8/2/2023

Business or Organization Name: Sam's Kabab Gyro **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2500 Murfreesboro Pike City: Nashville State: TN Zip Code: 37217

Purpose of Expenditure: Food for meet and Greet

Amount of Expenditure: \$ \$37.47 Date of Expenditure: \$ 8/4/2023

Business or Organization Name: La Concina Market **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2825 Smith Springs Rd City: Nashville State: TN Zip Code: 37217

Purpose of Expenditure: Food Election Watch Party

Amount of Expenditure: \$ \$49.64 Date of Expenditure: \$ 8/4/2023

Business or Organization Name: Kwik Stop **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2821 Smith Springs Rd City: Nashville State: TN Zip Code: 37217

Purpose of Expenditure: Ice

Amount of Expenditure: \$ \$7.51 Date of Expenditure: \$ 8/4/2023

Business or Organization Name: Daley Professional **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: PO Box 402 City: Montgomery State: NY Zip Code: 12549

Purpose of Expenditure: Website Fee

Amount of Expenditure: \$ \$29.00 Date of Expenditure: \$ 8/8/2023

Total Expenditures: \$ \$816.82

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Michele Vetter
2. Reporting Period: Start Date: 7/28/2023 End Date: 9/30/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$816.82

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: Truist OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2503 Lebanon Pike City: Nashville State: TN Zip Code: 37214

Purpose of Expenditure: Bank Fee

Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 8/21/2023

Business or Organization Name: Daley Professional OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: PO Box 402 City: Montgomery State: NY Zip Code: 12549

Purpose of Expenditure: Website Fee

Amount of Expenditure: \$ \$29.00 Date of Expenditure: \$ 9/8/2023

Business or Organization Name: Truist OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2503 Lebanon Pike City: Nashville State: TN Zip Code: 37214

Purpose of Expenditure: Bank Fee

Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 9/21/2023

Business or Organization Name: United States Postal Service OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 525 Royal Parkway City: Nashville State: TN Zip Code: 37229

Purpose of Expenditure: Postage

Amount of Expenditure: \$ \$27.72 Date of Expenditure: \$ 8/24/2023

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: \$ \$879.54

(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.)