

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. DATE OF REPORT <u>07/26/2022</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>(901)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 type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>07/01/2022</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>07/25/2022</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>07/26/22</u> <u>Donna McDonald-Martin</u> <u>07/26/22</u> signature of candidate    date    signature of political treasurer    date			
11. WITNESS SIGNATURE <u>[Signature]</u> <u>07/26/22</u> <u>[Signature]</u> <u>07/26/22</u> signature of witness    date    signature of witness    date			
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT .....		\$ <u>419.48</u>	
b. TOTAL RECEIPTS THIS PERIOD .....		\$ <u>0</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD .....		\$ <u>113.41</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		\$ <u>306.07</u>	
e. TOTAL LOANS OUTSTANDING .....		\$ <u>0</u>	
f. TOTAL OBLIGATIONS OUTSTANDING .....		\$ <u>0</u>	



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## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <i>Donna McDermold Martha Election Campaign</i>	14. REPORT COVERING THE PERIOD FROM: <i>07/01/22</i> TO: <i>07/25/22</i>
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**RECEIPTS**

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 0

b. Itemized Contributions (over \$100 from each source this period) ..... \$ 0

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ 0

16. LOANS RECEIVED THIS REPORTING PERIOD ..... \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD ..... \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) ..... \$ 0

**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)

<u>Gasoline</u>	\$ <u>105.10</u>
<u>Vantiv IAE Blue fees</u>	\$ <u>8.31</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) ..... \$ 113.41

b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ 0

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ 113.41

20. LOAN REPAYMENTS MADE THIS PERIOD ..... \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) ..... \$ 113.41

**22. IN-KIND CONTRIBUTIONS**

a. Unitemized in-kind contributions (\$100 or less from each source this period) ..... \$ 0

b. Itemized in-kind contributions (over \$100 from each source this period) ..... \$ 0

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) ..... \$ 0

**23. OBLIGATIONS**

a. Unitemized Obligations Outstanding (\$100 or less each) ..... \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) ..... \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) ..... \$ 0



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna McDermid-Martin Election Campaign</i>				2. REPORT COVERING THE PERIOD FROM: <i>04/01/22</i> TO: <i>07/25/22</i>		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name	Middle Name	Contribution Received For:		Amount of Contribution		
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>[Signature]</i>		
Address		<input type="checkbox"/> Runoff (Local Elections Only)				
City	State	Zip Code	Date of Contribution			Aggregate This Election
Occupation		Employer				
Employer						
First Name	Middle Name	Contribution Received For:		Amount of Contribution		
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>[Signature]</i>		
Address		<input type="checkbox"/> Runoff (Local Elections Only)				
City	State	Zip Code	Date of Contribution			Aggregate This Election
Occupation		Employer				
Employer						
First Name	Middle Name	Contribution Received For:		Amount of Contribution		
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>[Signature]</i>		
Address		<input type="checkbox"/> Runoff (Local Elections Only)				
City	State	Zip Code	Date of Contribution			Aggregate This Election
Occupation		Employer				
Employer						
First Name	Middle Name	Contribution Received For:		Amount of Contribution		
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<i>[Signature]</i>		
Address		<input type="checkbox"/> Runoff (Local Elections Only)				
City	State	Zip Code	Date of Contribution			Aggregate This Election
Occupation		Employer				
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.)					Amount <i>0</i>	

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna McDonald - MHA Election Campaign</i>				2. REPORT COVERING THE PERIOD FROM <i>07/21/22</i> TO <i>07/25/22</i> Amount			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				<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 EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Donna McDonald Martin Election Campaign</i>			2. REPORT COVERING THE PERIOD FROM <i>07/01/22</i> TO: <i>07/25/22</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>Vantiv Payment</i>		Middle Name		Purpose of Expenditure <i>Donato fees</i>	Amount of Expenditure <i>7 81</i>
Last Name/Business Name <i>Vantiv e Commerce Funds</i>		Address <i>Disc Donna M Martin</i>			
City		State			
		Zip Code			
First Name <i>Shell Gas Station</i>		Middle Name		Purpose of Expenditure <i>Campaign Gasoline can</i>	Amount of Expenditure <i>\$ 30 05</i>
Last Name/Business Name <i>Shell Oil 12761 5542</i>		Address			
City <i>Lakeland</i>		State <i>TN</i>			
		Zip Code <i>38002</i>			
First Name <i>Shell Gas Station</i>		Middle Name		Purpose of Expenditure <i>Campaign Gasoline</i>	Amount of Expenditure <i>\$ 35 00</i>
Last Name/Business Name <i>Shell Oil 12761 5542</i>		Address			
City <i>Lakeland</i>		State <i>TN</i>			
		Zip Code <i>38002</i>			
First Name <i>Regions Vantiv Payment</i>		Middle Name		Purpose of Expenditure <i>Donato fees</i>	Amount of Expenditure <i>50 ¢</i>
Last Name/Business Name <i>Vantiv e Commerce Funds</i>		Address <i>Disc Donna M Martin</i>			
City		State			
		Zip Code			
First Name <i>Shell Gas Station Circle K</i>		Middle Name		Purpose of Expenditure <i>Campaign Gasoline</i>	Amount of Expenditure <i>\$ 40 05</i>
Last Name/Business Name		Address <i>7461 Hwy 64</i>			
City <i>Bartlett</i>		State <i>TN</i>			
		Zip Code <i>38133</i>			
First Name		Middle Name		Purpose of Expenditure <i>/</i>	Amount of Expenditure <i>/</i>
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.)				<i>113 91</i>	

# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD									
<i>Donna McDonald Martin Election Campaign</i>					FROM:		TO:							
					<i>07/01/22</i>		<i>07/25/22</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				Address		Loan Received For:			Date of Loan					
				City		State		Zip Code		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <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		Zip Code			City			State		Zip Code	
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		Zip Code			City			State		Zip Code	
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		Zip Code			City			State		Zip Code	
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		Zip Code			City			State		Zip Code	
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding								
4. Totals for all Loans (complete on last page of itemized loans)					Outstanding Loan Balance (Beginning of Period)		Loans Received		Loan Payments		Outstanding Loan Balance (End of Period)			
(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.)														



## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Dom2 McDonald Martin Election Campaign</i>			2. REPORT COVERING THE PERIOD FROM: <i>07/01/22</i> TO: <i>07/25/22</i>			
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.)						

