

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                          |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------|--|
| 1. DATE OF REPORT<br><u>October 3 2022</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 2.a. NAME OF CANDIDATE OR COMMITTEE<br><u>Debbie McMillan Barrett</u>                    |  |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | 3. ELECTION DATE                                                                         |  |
| 4.a. CAMPAIGN ADDRESS AND PHONE<br>Street or Rural Route City State Zip Code Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                          |  |
| 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)<br>Street or Rural Route City State Zip Code Phone                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                          |  |
| <u>2232 Oakwood Road Franklin Tenn 37064 615-708-7292</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                          |  |
| 5. OFFICE SOUGHT (include district number, if applicable)<br><u>Circuit Court Clerk</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 6. NAME OF POLITICAL TREASURER (may be candidate)<br><u>Debbie McMillan Barrett</u>      |  |
| 7. CATEGORY OR REPORT (Check one)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                          |  |
| <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" 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<br><u>July 26, 2022</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | 8.b. ENDING DATE OF REPORTING PERIOD<br><u>September 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.)<br>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>Debbie McMillan Barrett</u> <u>10/3/2022</u><br>signature of candidate date                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <u>Debbie McMillan Barrett</u> <u>10/3/2022</u><br>signature of political treasurer date |  |
| 11. WITNESS SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                          |  |
| signature of witness                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | signature of witness                                                                     |  |
| date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | date                                                                                     |  |
| 12. SUMMARY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                          |  |
| a. BALANCE ON HAND LAST REPORT .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | \$ <u>-0-</u>                                                                            |  |
| b. TOTAL RECEIPTS THIS PERIOD .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | \$ <u>-0-</u>                                                                            |  |
| c. TOTAL DISBURSEMENTS THIS PERIOD .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | \$ <u>-0-</u>                                                                            |  |
| d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | \$ <u>-0-</u>                                                                            |  |
| e. TOTAL LOANS OUTSTANDING .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | \$ <u>-0-</u>                                                                            |  |
| f. TOTAL OBLIGATIONS OUTSTANDING .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | \$ <u>-0-</u>                                                                            |  |

