

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT RECEIVED

For State and Local Candidates For Single-Candidate Committees

APR 08 2022 12:50 PM
WILSON COUNTY ELECTION COMMISSION

1. DATE OF REPORT <u>March 25, 2022</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Harold Glenn Denton</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>2022</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>421 Rome Pike Lebanon Tenn. 37087 615-202-1134</u>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>Same as above</u>	
5. OFFICE SOUGHT (include district number, if applicable) <u>County Commissioner of District 20</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Sherian Renee Denton</u>
7. CATEGORY OR REPORT (Check one) <input checked="" 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 type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b. ENDING DATE OF REPORTING PERIOD
9. (Check one) a. <input 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 checked="" 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>Harold Glenn Denton</u> signature of candidate	<u>4/7/22</u> date
<u>Sherian Renee Denton</u> signature of political treasurer	<u>4/7/22</u> date
11. WITNESS SIGNATURE <u>Healey Keisley</u> signature of witness	<u>4/7/22</u> date
<u>Healey Keisley</u> signature of witness	<u>4/7/22</u> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>0</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>1600⁰⁰</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>12.51</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>1600⁰⁰</u> \$ 1587.49 <u>1587.49</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>

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SUMMARY PAGE - CANDIDATE

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13. NAME OF CANDIDATE OR COMMITTEE (In Full) <i>Harold Glenn Denton</i>	14. REPORT COVERING THE PERIOD	
	FROM: <i>WILSON COUNTY</i>	TO: <i>ELECTION COMMISSION</i>

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

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

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

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

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)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

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.) \$ _____

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WILSON COUNTY
ELECTION COMMISSION

22. IN-KIND CONTRIBUTIONS

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

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

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

23. OBLIGATIONS

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

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

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



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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

WILSON COUNTY
ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE <i>Harold Glenn Denton</i>			2. REPORT COVERING THE PERIOD FROM: <i>Jan-16</i> TO: <i>March 31</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>\$1600.00</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name <i>Albert</i>	Middle Name <i>J</i>	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution <i>\$1,600.00</i>
Last Name/Organization Name <i>M. S. Call</i>		Date of Contribution		Aggregate This Election
Address		Date of Contribution		
City <i>Lebanon</i>	State <i>TN</i>	Zip Code <i>37087</i>	Aggregate This Election	
Occupation <i>Furniture Business</i>		Date of Contribution		Aggregate This Election
Employer <i>Self - employed</i>		Date of Contribution		
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution
Last Name/Organization Name		Date of Contribution		Aggregate This Election
Address		Date of Contribution		
City	State	Zip Code	Aggregate This Election	
Occupation		Date of Contribution		Aggregate This Election
Employer		Date of Contribution		
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution
Last Name/Organization Name		Date of Contribution		Aggregate This Election
Address		Date of Contribution		
City	State	Zip Code	Aggregate This Election	
Occupation		Date of Contribution		Aggregate This Election
Employer		Date of Contribution		
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution
Last Name/Organization Name		Date of Contribution		Aggregate This Election
Address		Date of Contribution		
City	State	Zip Code	Aggregate This Election	
Occupation		Date of Contribution		Aggregate This Election
Employer		Date of Contribution		
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution
Last Name/Organization Name		Date of Contribution		Aggregate This Election
Address		Date of Contribution		
City	State	Zip Code	Aggregate This Election	
Occupation		Date of Contribution		Aggregate This Election
Employer		Date of Contribution		
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>\$1,600.00</i>

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ELECTION COMMISSION

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ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

WILSON COUNTY
ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
				Amount	
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:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Aggregate this Election
City	State	Zip Code		Description of In-Kind Contribution	
Occupation	Employer				
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Aggregate this Election
City	State	Zip Code		Description of In-Kind Contribution	
Occupation	Employer				
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Aggregate this Election
City	State	Zip Code		Description of In-Kind Contribution	
Occupation	Employer				
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Aggregate this Election
City	State	Zip Code		Description of In-Kind Contribution	
Occupation	Employer				
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Aggregate this Election
City	State	Zip Code		Description of In-Kind Contribution	
Occupation	Employer				
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Aggregate this Election
City	State	Zip Code		Description of In-Kind Contribution	
Occupation	Employer				

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WILSON COUNTY
ELECTION COMMISSION

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

WILSON COUNTY

1. NAME OF CANDIDATE OR COMMITTEE Harold Glenn Denton		2. REPORT COVERING THE PERIOD FROM: TO:	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
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 Cedarstone Bank		checking fee	\$12.51/
Address W. Main St.			
City Lebanon	State TN		
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	
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	
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.)			\$12.51/

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ELECTION COMMISSION



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ITEMIZED STATEMENT OF LOANS - CANDIDATE

WILSON COUNTY
ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD						
					FROM:		TO:				
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	
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.)											



APR 08 2022

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

DECATUR COUNTY ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE				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.)							