## CAMPAIGN FINANCIAL DISCLOSURE STATEMENT OF A CAMPAIGN FINANCIAL DI

For Single-Candidate Committees

For	9107 8 - 70871M					
1. DATE OF REPORT	2.a. NAME OF C				THE P	
July 7, 2016	Gwyn	ne L.	Queer	18/	SA MECEIVED	
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DA		
4 - CAMPAICH ADDDECC AND BUCHE				8-16		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Phone	
	Mt. Julia	t	TN	37122	615-773-1977	
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route るコーソッド たよ,	than 4.a.) City H. Jaliet		State 1 N	Zip Code 31/22	Phone & 15 - 773 - 1977	
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME	OF POLITICAL	TREASURER (may		
7. CATEGORY OR REPORT (Check one)  FIRST SECOND THIRD  QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE-	PRE- GENERAL	MID-YEAR SUPPLEMENTA	YEAR-END L SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD  April 1, 2016			DATE OF REPO へe 30			
9. (Check one)		***************************************		1 10.0	· ( + · · · · · · · · · · · · · · · · ·	
<ul> <li>a.  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.)</li> <li>b.  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.</li> </ul>						
<ol> <li>I/we do solemnly swear or affirm that the inf accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we s benefit of the candidate or for any other nonp</li> </ol>	ns and expenditures wear or affirm that r political purpose as	required to be no campaign of defined by the	e reported by the ontributions hav federal internal	e candidate committe e been expended fo revenue code.	ee by the Campaign r the personal financial	
Hughwe L. Ducesel	11 8/2016 date		Signature of	X Ducey political treasurer	1/8/2016 date	
11. WITNESS SIGNATURE  WANNEY FAMO  signature of witness	07/8/2010 date	<u>S</u>	WANNAM signate	LS/L	07/08/2010 date	
12. SUMMARY						
a. BALANCÉ ON HAND LAST REPORT				s <u>0.00</u>	_	
b. TOTAL RECEIPTS THIS PERIOD	•••••••••••••••••••••••••••••••••••••••	• • • • • • • • • • • • • • • • • • • •		\$ <u>2250.00</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD		••••••	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	651.00	<del></del>	
d. BALANCE ON HAND (12.a. plus 12.b. mir	nus 12.c.)	***************************************			s 1599.00	
e. TOTAL LOANS OUTSTANDING			***************************************		s <u>0.00</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		***************************************			\$_0.00	



SUMMARY PAGE - CANDIDATE

	T						
13. NAME OF CANDIDATE OR COMMITTEE (In Full)  Gwynne L, Queener	14. REPORT COVERING THE PERIOD						
RECEIPTS	FROM 4 (4) 12016 80; 6/30/2016						
RECEIPTS  15. CONTRIBUTIONS (other than loans and interest)  FIG. 200 April 1997  The state of t							
RECEIPTS  15. CONTRIBUTIONS (other than loans and interest)  a. Unitemized Contributions (\$100 or less from each source this period)  \$\frac{\text{50.00}}{\text{50.00}} \text{\$\frac{\text{50.00}}{\text{50.00}}} \text{\$\frac{\text{50.00}}{\text{50.00}}}							
b. Itemized Contributions (over \$100 from each source this period)	\$ 1700.00						
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.)	\$ 2250,00						
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)						
postage \$ 34.00							
<u> </u>							
<u> </u>							
<u></u> \$							
<u></u> \$	······································						
\$							
\$							
<u> </u>							
	277						
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.)	ı						
20. LOAN REPAYMENTS MADE THIS PERIOD							
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>65127</u>						
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.)	s <u>0.00</u>						
23. OBLIGATIONS							
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ 0,00						
b. Itemized Obligations Outstanding (Over \$100 each)	\$						
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	12f) \$ 0 0 0 1						



## ITEMIZED STATEMENT OF CONTRIBUTIONS SECANDIDATE 2016

I low in a large 1 / V	VERING THE PERIOD		
Gwynne L. C	MANJS (8/30/2016		
TOTAL ITEMIZED CAMPAIGN CON     COMPLETE THE APPROPRIATE ITEM	TRIBUTIONS FROM PRECEDING F	PAGE (enter \$0 if first itemized page)	0.00
First Name	[ WINDER THOUSE		utor) Amount of Contribution
Last Name/Organization Name		Contribution Received For:	Amount of Contribution
Law Office of	Henry S. Queener	Primary Election General Election	300.00
Address 3 5 Ave. N	*	Runoff (Local Elections Only)	
City Nashville	State	Date of Contribution	Aggregate This Election
Occupation		5-13-2016	300,00
Employer Self	<u></u>		
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		Primary Election General Election	
Queener		General Election	00,00
Address 821 York Rd.		Runoff (Local Elections Only)	
City Mt. Juliet	Slate Zip Code 37/22	Date of Contribution	Aggregate This Election
Occupation Retined teach	IJÖ.¥	5-13-2016	900.00
Employer	~ 1		100.00
First Name James	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		Primary Election General Election	150.00
Address FF FF		D Buself // cont Streeting Out >	130.00
2558 Edinbur	1 < 1	L Kulloli (Local Elections Only)	!
City	State Tin Code	Runoff (Local Elections Only)	
Mt. Juliet	State Zip Code 37/22	Date of Contribution	Aggregate This Election
Mt. Juliet Occupation Manager	State Zip Code 37/22		
Mt. Juliet Occupation 17 Manager Employer	State Zip Code 37/22	Date of Contribution  Sunz 13, 2016	Aggregate This Election
Occupation 17 Manager Employer Comprehensive	State Zip Code 37/22	Date of Contribution  Sunz 13, 2016	
Occupation  To Manage r  Employer  Comprehensive  First Name/Organization Name	State Zip Code 37122  Pain Specialis  Middle Name	Date of Contribution  June 13, 2016  ts  Contribution Received For:	1050.60
Occupation IT Manager Employer Comprehensive First Name Susan Last Name/Organization Name Address.  Address.	Rain Specialis Middle Name  nds of Susan Lyn	Date of Contribution  June 13, 2016  ts  Contribution Received For:	1050.00
Occupation IT Manager Employer Comprehensive First Name Susan Last Name/Organization Name Address Address Green Ha	State Zip Code 37/22  Rain Specialis  Middle Name  nds of Susan Lyn  Inhor Rd.  State Zip Code	Date of Contribution  JUNE 13, 2016  Ls  Contribution Received For:  Primary Election  General Election	1050.60 Amount of Contribution 500.00
Occupation IT Manager Employer Comprehensive First Name Susan Last Name/Organization Name Address City Occupation City Mt. Juliet Manager Manager  Manager	State Zip Code 37122  Rain Specialis  Middle Name  nds of Susan Lyn urbor Rd.	Date of Contribution  Sunz 13, 2016  ts  Contribution Received For:  Primary Election General Election  Runoff (Local Elections Only)  Date of Contribution	Amount of Contribution  500.00  Aggregate This Election
Occupation  To Manager  Employer  Comprehensive  First Name  Susan  Last Name/Organization Name  YMN Trie  Address  See Green Ha  City Old Hickory  Occupation  Candidate  Employer	State Zip Code 37/22  Rain Specialis  Middle Name  nds of Susan Lyn  Inhor Rd.  State Zip Code	Date of Contribution  Sunz 13, 2016  ts  Contribution Received For:  Primary Election	1050.00 Amount of Contribution 500.00
Occupation IT Manager Employer Comprehensive First Name Susan Last Name/Organization Name Address City IL Hickory Occupation Candidate	State Zip Code 37/22  Rain Specialis  Middle Name  nds of Susan Lyn  Inhor Rd.  State Zip Code	Date of Contribution  Sunz 13, 2016  ts  Contribution Received For:  Primary Election General Election  Runoff (Local Elections Only)  Date of Contribution	Amount of Contribution  500.00  Aggregate This Election
Occupation  To Manager  Employer  Comprehensive  First Name  Susan  Last Name/Organization Name  YMN Trie  Address  See Green Ha  City Old Hickory  Occupation  Candidate  Employer	State Zip Code 37/22  Rain Specialis  Middle Name  nds of Susan Lyn  Irbor Rd  State Zip Code 37/38	Date of Contribution  Sunz 13, 2016  ts  Contribution Received For:  Primary Election General Election  Runoff (Local Elections Only)  Date of Contribution	Amount of Contribution  500.00  Aggregate This Election

## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE 15

1. NAME OF CANDIDATE OR COMMITTEE 2. REPORTED 2. REPOR					ON COL
Gwynne L. Queener FROM: 4/1/16					10.MM/6840/12016
TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 1550.00
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			Primary Election	General Election	<b>.</b>
Foushee Address F: O 1			Runoff (Local Election	150.00	
100 Five Oaks Cir		Date of Contribution		Aggregate This Election	
Levanon IN 37087			June 17,		
Business Development Manager				2010	1700.00
W.R. Benkley First Name	Middle Nam	ne	Contribution Received For:	Amount of Contribution	
Last Name/Organization Name				☐ Primary Election ☐ General Election	
Address		Andrea and the second s	Runoff (Local Election		
City			Date of Contribution		Aggregate This Election
Occupation				193,0300	
·					
Employer					
First Name Middle Name			Contribution Received For:	Amount of Contribution	
Last Name/Organization Name			Primary Election	:	
Address			Runoff (Local Elections		
City	State Zip Code		Date of Contribution		Aggregate This Election
Occupation			İ	9	
Employer					
First Name Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name			Primary Election General Election		
Address			Runoff (Local Elections Only)		
ity State Zip Code		Date of Contribution		Aggregate This Election	
Occupation					
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.)					

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

			SLECTION COMMIS	T		
NAME OF CANDIDATE OR COMMITTEE			FROM: 4// J. JTO: 6/30/Jan/			
Gwynne L. Quee			FROM: 4/1/20.	10: 4/30/20/6		
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	URES FR	OM PRECEDING PA	GE (enter \$0 if first itemized pag	e)	0,00	
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITEN	NZED EXPENDITURE	(expenditures totaling more than \$100 to	o any payee during the p	eriod)	
First Name	Middle Na	and the second of the second o	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	es Post Office		Durchase	stamps	34.00	
united States Vosi						
2491 N. Mt. Juliet R	) d				]	
Mt, Juliet	State /	Zip Code 57/22				
First Name	Middle Na	mė	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name  R # M Print	i p a		Printinge	S Vard	#	
Address P.O. BOX 930	J		Printing of Var Signs		617.27	
M. Juliet	State.	Zip Code 37/2/				
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	1		-			
Address						
City	State	Zip Code	1			
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
,		Lip 0000				
irst Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
ast Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middle Name		Durana of Function			
		Purpose of Expenditure		Amount of Expenditure		
ast Name/Business Name						
ddress						
ity	State	Zip Code				
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of (If this is the last page of expenditures, this amount must be	f this form are	used.) em 19b. of summary.)			651,27	