CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

APR 06 2022

1. DATE OF REPORT	2.a. NAMEOFC	ANDIDATE OR CO	MMITTEE		WILSON COUNTY 6				
4-5-2022	Doro	thy Cri	tchlo	W EL	ECTION COMMISSION 8				
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE					
AND HON ADDDESS AND BUONE				202	<u></u>				
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Phone				
110 Hunter Dr.	Mt. Juli	et	TN	37122	615.681.7465				
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	than 4.a.) City		State	Zip Code	Phone				
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME OF	POLITICAL T	TREASURER (may be	e candidate)				
Wilson County School Boar	100	Con	nie M	itchell					
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD CHARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL				
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDINGD							
Jan. 16, 2022		March	31, 2	022					
 9. (Check one) 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.) 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. 									
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. Dorothy J. Catcher 4-5-22 Signature of candidate 4-5-22 Signature of political treasurer 4-5-22 date Signature of political treasurer date Signature of political treasurer date Signature of political treasurer Signature of Signature									
11. WITNESS SIGNATURE LUXUM SIGNATURE signature of witness	4/5/2 2 date	7	UAC signat	as Control of Witness	low 4/5/22 date				
12. SUMMARY									
a. BALANCE ON HAND LAST REPORT				\$ <u>Ø</u>	-				
b. TOTAL RECEIPTS THIS PERIOD				\$ 1000.00	-				
c. TOTAL DISBURSEMENTS THIS PERIOD				\$	-				
d. BALANCE ON HAND (12.a. plus 12.b. mi	inus 12.c.)				\$ 1000.00				
e. TOTAL LOANS OUTSTANDING					\$ 1000.00				
f. TOTAL OBLIGATIONS OUTSTANDING			11		\$				

NEVERYED

SUMMARY PAGE - CANDIDATE

APR -6 2022

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THEIRERIOD
Dorothy Critchlow	FROM: Jan. 16 ELECTION COMMISSION
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	52
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 1000-00
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)
\$	
\$	
\$	
\$	
	<u> </u>
\$	
\$	_
\$	_
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.)	\$ <u>Ø</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.	ı.)\$ <u>Ø</u>
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 iter	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

First Name Middle Name	1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS 4. COMPLETE THE APPROPRIATE ITEMS FOR RACH TEMAZED CONTRIBUTION (contributions balling more than \$100 from eny contribution) First Name Contribution Received For:	Dorothy Critchl		FROM 16,202	TO March 31, 2022		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMAZED CONTRIBUTION (contributions solaling more than \$100 from any contribution) First Name Middle Name Middle Name Contribution Received For: Amount of Contribution	. A	Amount				
First Name Mode Name			L D			
Cart Name	4. COMPLETE THE APPROPRIATE ITEMS FOR EA				100 from any contributor	A C
Address Runoff (Local Elections Only)	First Name	Middle Nam	e	Contribution Received For:	Amount of Contribution	
Address Runoff (Local Elections Only)	Lest Name/Organization Name			Primary Election	General Election	
City State Zip Code Date of Contribution Aggregate This Election	Last Name/Organization Name					
Date of Contribution Date of Contribution Aggregate This Election	Address			Runoff (Local Election	s Only)	
Cocupation Employer First Name Middle Name Contribution Received For: Primary Election General Election Runoff (Local Elections Only)				D	A =====to This Clastics	
Employer Last Name Last Name/Organization Name Contribution Received For: Primary Election General Election Primar	City	State	Zip Code	Date of Contribution		Aggregate This Election
Employer Last Name Last Name/Organization Name Contribution Received For: Primary Election General Election Primar	Occupation					
First Name Middle Name	Сссиравон					
Last Name/Organization Name	Employer					
Last Name/Organization Name						
Address Runoff (Local Elections Only)	First Name	Middle Nam	ne	Contribution Received For:		Amount of Contribution
Address Runoff (Local Elections Only)				Doing Floring F	7 Conord Floation	
City State Zip Code Date of Contribution Aggregate This Election Contribution Contribution Contribution	Last Name/Organization Name			Primary Election	_ General Election	
City State Zip Code Date of Contribution Aggregate This Election Contribution Contribution Contribution				Runoff (Local Election	ns Only)	
Cocupation Employer Contribution Received For:	Address					
Employer First Name Last Name/Organization Name City State Zip Code Date of Contribution Employer Contribution Received For: Runoff (Local Elections Only) Aggregate This Election Cocupation Employer City Middle Name Contribution Received For: Primary Election General Election Aggregate This Election Aggregate This Election Primary Election General Election Amount of Contribution Aggregate This Election Runoff (Local Elections Only) Aggregate This Election Address Date of Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Aggregate This Election Aggregate This Election Aggregate This Election Cocupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry loward to litem 3, of next page of fadditional pages of this form are used.)	City	State	Zip Code	Date of Contribution		Aggregate This Election
Employer First Name Last Name/Organization Name City State Zip Code Date of Contribution Employer Contribution Received For: Runoff (Local Elections Only) Aggregate This Election Cocupation Employer City Middle Name Contribution Received For: Primary Election General Election Aggregate This Election Aggregate This Election Primary Election General Election Amount of Contribution Aggregate This Election Runoff (Local Elections Only) Aggregate This Election Address Date of Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Aggregate This Election Aggregate This Election Aggregate This Election Cocupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry loward to litem 3, of next page of fadditional pages of this form are used.)						
First Name Middle Name	Occupation					
First Name Middle Name	Employer	_				
Last Name/Organization Name Address City State Zip Code Date of Contribution Aggregate This Election Employer First Name Middle Name Contribution Received For: Last Name/Organization Name Last Name/Organization Name Address City State Zip Code Date of Contribution Amount of Contribution Aggregate This Election Amount of Contribution Cocupation But State Zip Code Date of Contribution Aggregate This Election Aggregate This Election Aggregate This Election Aggregate This Election City State Zip Code Date of Contribution Aggregate This Election Aggregate This Election Cocupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)	Z.inployo.					
Primary Election General Election	First Name	Middle Nam	e	Contribution Received For:	and the state of the state of	Amount of Contribution
Address	First Name					
City State Zip Code Date of Contribution Aggregate This Election Cocupation	Last Name/Organization Name			Primary Election	General Election	
City State Zip Code Date of Contribution Aggregate This Election Cocupation					O-1-)	
Cocupation Employer Contribution Received For: Amount of Contribution	Address		Runoff (Local Election	is Only)		
Cocupation Employer First Name Middle Name Contribution Received For: Amount of Contribution Primary Election General Election Runoff (Local Elections Only) City State Zip Code Date of Contribution Aggregate This Election Employer 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)	City	State	Zip Code	Date of Contribution		Aggregate This Election
Employer First Name Last Name/Organization Name Address City State Zip Code Date of Contribution Aggregate This Election Cocupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3, of next page if additional pages of this form are used.)	City					
First Name Middle Name Contribution Received For: Amount of Contribution	Occupation					
First Name Middle Name Contribution Received For: Amount of Contribution						
Primary Election General Election	Employer					
Primary Election General Election		100 1 to 11		Contribution Pacaivad For		Amount of Contribution
Address	First Name	Middle Nam	le	Outuibution Necesseu Fot.		our of contribution
Address City State Zip Code Date of Contribution Aggregate This Election Cccupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)	Last Name/Organization Name			Primary Election	General Election	
City 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.)						
Occupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)	Address			Runoff (Local Election	is Only)	
Occupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)		01-1-	7in Codo	Date of Contribution		Aggregate This Election
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)	City	State	Zip Code	Date of Contribution		, iggregate this interest
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)	Occupation					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.)						
(Carry forward to item 3. of next page if additional pages of this form are used.)	Employer					
(Carry forward to item 3. of next page if additional pages of this form are used.)						
(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.)						70K
	(Carry forward to item 3. of next page if additional pages of	of this form a be shown in i	re used.) item 15b. of summary.)			Ø



APR -6 2022 ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE
WILSON COUNTY
FLECTION CONTRIBUTIONS

1. NAME OF CANDIDATE OR COM						LTO: AA					
Dorothy Critch		TO: March 31, 2022 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 Primary Election	d For: General Election	Value of In-Kind Contribution					
Last Name/Organization Name				Runoff (Local Election	ns Only)						
Address				Date of In-Kind Contribution		Aggregate this Election					
City	City State Zip Code			Description of In-Kind Contribution							
Occupation	Employer										
First Name		Middle Nam	e	In-Kind Contribution Received Primary Election	d For: General Election	Value of In-Kind Contribution					
Last Name/Organization Name				Runoff (Local Election	ns Only)						
Address				Date of In-Kind Contribution	Aggregate this Election						
City		State	Zip Code	Description of In-Kind Contribution							
Occupation	Employer										
E. I.M.		Middle Nam	Δ	In-Kind Contribution Received	d For:	Value of In-Kind Contribution					
THISTIGATIO			Primary Election General Election								
Last Name/Organization Name				Runoff (Local Elections Only)							
Address			Date of In-Kind Contribution		Aggregate this Election						
City		State Zip Code		Description of In-Kind Contribution							
Occupation Employer											
Total Name		Middle Nam		In-Kind Contribution Receive	d For:	Value of In-Kind Contribution					
First Name		Wilddie Hair		_	General Election						
Last Name/Organization Name				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: Primary Election							
Last Name/Organization Name			Runoff (Local Election	_							
Address			Date of In-Kind Contribution		Aggregate this Election						
City	City State Zip Code			Description of In-Kind Contribution							
Occupation	Employer										
TOTAL ITEMIZED IN-KIND CON (Carry forward to item 3. of next page if ad (If this is the last page of in-kind contribution)	ditional pages	of this form ar	e used.) own in item 22b. of summary	·) Pag	ge_H_ of	Ø RDA 1159					
SS-1128 (Rev. 2/06)				ray	, , , , , , , , , , , , , , , , , , ,	1100					

SS-1128 (Rev. 2/06)



APR -6 2022

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Dorothy Critch los				2. REPORT COVER	TOMarch 31,2022		
TOTAL ITEMIZED CAMPAIGN EXPENDITE COMPLETE THE APPROPRIATE ITEMS FOR ITEMS.					riod)		
First Name	Middle Na		Purpose of Expenditure	to any payer uning me pe	Amount of Expenditure		
Last Name/Business Name	1		1				
Address							
City	State	Zip Code					
First Name	st Name Middle Name				Amount of Expenditure		
Last Name/Business Name							
Address			-				
City	State	Zip Code					
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			1				
Address		1					
City	State	Zip Code	1				
First Name	First Name Middle Name				Amount of Expenditure		
Last Name/Business Name			1				
Address			1				
City	State	Zip Code	-				
First Name	Middle Nam	ee	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nam	e	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 (If this is the last page of expenditures, this amount must					Ø		



ITEMIZED STATEMENT OF LOANS - CANDIDATE TE OR COMMITTEE

1. NAME OF CANDIDATE OR CO	MMITTEE							2.	REPORT	COVE	RIN	3 THE PERIOD	
D 41 0.									OM:		TO		
Dorothy Cri	tchl	OW						Ja	0.16.21	122	N	Jar. 31, 202	
3. COMPLETE THE APPROPRIAT	TE ITEMS	FOR EACH	ITEMIZ	ZED LOAN	(loans totaling r	nore than \$1	100 from any	source	during the pe	eriod)			
Complete the Following for the Source	of the Loan												
First Name	Middle Nar	ne			Loan Balance	Loai			oan	Ou	stand	ing Loan Balance	
Dorothy	Irene			(Beginning	of Period)	Recei	ived	Pay	ments		(En	d of Period)	
Last Name/Organization Name				1 ø		1,00	C 50	Ç	3	1,	00	0.9	
Critchlow													
Address				Loan Receiv	ed For:				Date of Loa				
110 Hunter Dr.	State Zip Code			☐ Primar	y Election	Gener	ral Election		3-2	8-2	2	•	
Mt. Juliet	TAV	3712											
				or Above Loa	n (If more spa	ce is need	ed please a	ttach	a nage)				
First Name		Middle Nam		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	First Name	00 10 11000	ou ploude u	ill Court	u paga)	Middle	Nam	•	
, iist rame		I wilder Hair			, modername								
Last Name/Organization Name					Last Name/Org	anization N	ame						
Address					Address								
City		State	Zip Co	ode	City					State		Zip Code	
Amount Guaranteed Outstanding					Amount Guarar	teed Outsta	ınding						
First Name	-hornes	Middle Name		ST 577	First Name	1 -5 -				Middle	NI-		
First Name Middle Name				First Name Middle Name									
Last Name/Organization Name					Last Name/Organization Name								
Address					Address								
City		State	Zip Co	de	City		State Zip Code					Zip Code	
Amount Guaranteed Outstanding					Amount Guaran	teed Outsta	nding						
First Name		Middle Name		N	First Name			elle.		Middle	Name		
Last Name/Organization Name					Last Name/Organization Name								
Address					Address								
City		State	Zip Coo	le	City					State		Zip Code	
Amount Guaranteed Outstanding					Amount Guarant	eed Outstar	nding						
First Name		Middle Name			First Name Middle Name								
Last Name/Organization Name					Last Name/Orga	nization Na	me						
Address					Address								
					.50.000								
City		State	Zip Cod		City					State		Zip Code	
Amount Guaranteed Outstanding				<i>\</i>	mount Guarant	eed Outstan	ding						
. Totals for all Loans (complete on las			is)		Outstanding Loa		Loans		Loan			anding Loan Balance	
(Total loans received should also be shown in i (Total loan payments should also be shown in i				1	(Beginning of	Period)	Receive		Paymer	nts		End of Period)	
(Total outstanding loan balance should also be shown in item 12.e. on front page.)					1		1,000	000	Ø		10	00.00	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATEN COUNTY

	2. REPORT COVERING THE PERIOD					
1. NAME OF CANDIDATE OR COMMITTEE						arch 31, 2022
Dorothy Critchlow 3. COMPLETE THE APPROPRIATE ITEMS F	OR FACE	LITEMIZED	Outstanding Balance	Debt Incurred	Payments	Outstanding Balance
OBLIGATION (obligations totaling more that	IGATION (obligations totaling more than \$100 owed to any			This Period	This Period	(End of Period)
person/vendor at the end of the reporting po	eriod)					
First Name	Middle Nar	ne				
Last Name (Durings Name			-			
Last Name/Business Name						
Address						
City	State	Zip Code	-			
Description of Obligation						
First Name	Middle Nar	ne			W	*
			4	1		
Last Name/Business Name						
Address						
City	State	Zip Code	-			
City	Cidio	Lip doub				
Description of Obligation						
		- A				
First Name	Middle Nar	ne)		
Last Name/Business Name ,						
			-			1
Address						
City	State	Zip Code				1
Description of Obligation						
Doos, paos di Congono.						
First Name	Middle Nan	ne				
too Marie Duciness Name			_			
Last Name/Business Name						
Address			7			1
City	State	Zip Code	-			
Description of Obligation						
	14:11:11		144 14 14 10 10 10			The second
First Name	Middle Nan	16				
Last Name/Business Name						
Address			-			
THE TOPO						
City	State	Zip Code				
Description of Obligation						
4. TOTALS		ales has d				d
(Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)	olumn must	also be shown				φ