| CAMPAIGN FIN | ANCIAL | . DISCL | .osu | RE STAT | EMENT/FD |
|---|---|--|--|--|--|
| | or State and r Single-Ca | Enter year 18 and 18 an | | | JUL 30 2014 |
| DATE OF REPORT | 2.a. NAME OF C | CANDIDATE OR CO | | Å | ELECTION COMMING |
| b. IF COMMITTEE, NAME OF CANDIDATE | Izrny | DUNCAN | | 3. ELECTION DAT | - MANAGORIAN |
| RE- Elect Terry | DUNCAL | N | | August | 7,2014 |
| .a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route | City | | State | Zip Code | Phone |
| 38 Forrest Men Us. | Old Idea | bory | Tv. | 37138 | 615-943-3430 |
| b. CANDIDATE'S HOME ADDRESS (if differe Street or Rural Route | nt than 4.a.) City | / | State | Zip Code | Phone |
| OFFICE SOUGHT (include district number, | if applicable) | 6. NAME OF | POLITICAL | TREASURER (may be | e candidate) |
| Junty Commission | Vistrict 8 | Ter | ry L | uncon | |
| CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER | FOURTH R QUARTER | PRE-PRIMARY | PRE- GENERAL | MID-YEAR SUPPLEMENTAL | YEAR-END SUPPLEMENTAL |
| a. BEGINNING DATE OF REPORTING PERIOD | | 8.b. ENDINGE | ATE OF REPO | ORTING PERIOD | SOIT ELIVERY IN IL |
| 7-/-/4 (Check one) | | 7-28 | 5-19 | | |
| b. This campaign is required to file a d and/or expenditures total more than 1. I/we do solemnly swear or affirm that the accurate accounting of campaign contribut Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other no signature of candidate | \$1,000 for this reporting the state of the s | rting period. ed in this campaig es required to be it t no campaign coi | n financial di reported by ti ntributions ha ederal interna | sclosure report is true he candidate committe we been expended for | and that this report is an e by the Campaign |
| signature of witness | 7-15-1 date | 4 (2 | signa | ature of witness | 7-29-19 date |
| . SUMMARY | | | | 0-11-00 | |
| a. BALANCE ON HAND LAST REPORT | | | | \$ 951.00 | - |
| b. TOTAL RECEIPTS THIS PERIOD | | | | \$ 800.00 | - |
| c. TOTAL DISBURSEMENTS THIS PERIOD | | | | \$ 1642.5. | 3 |
| d. BALANCE ON HAND (12.a. plus 12.b. | minus 12.c.) | | | | s 108.47 |
| e. TOTAL LOANS OUTSTANDING | | | | | \$ 800.00 |
| f. TOTAL OBLIGATIONS OUTSTANDING . | | | | | so- |



SUMMARY PAGE - CANDIDATE

RECEIVED WILLS

| 13. NAME OF CANDIDATE OR COMMITTEE (In Full) | | 14. REPORT, COV | ERING THE PERIOD | | | | |
|--|--------------|-------------------------|--|--|--|--|--|
| Terry Duncan | | FROM: 7-1-14 | TO: 7-28-14 | | | | |
| RECEIPTS 15. CONTRIBUTIONS (other than loans and interest) | | | NI22IQM | | | | |
| a. Unitemized Contributions (\$100 or less from each source this perio | d) | \$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 | | | \$ 800.00 | | | | |
| 17. INTEREST RECEIVED THIS REPORTING PERIOD | \$0- | | | | | | |
| 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) | | | | |
| | S | | | | | | |
| \$ | S | | | | | | |
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| \$ | | | | | | | |
| | | -2 | | | | | |
| Total of Expenditures (\$100 or less each payee) | | | - | | | | |
| b. Itemized Expenditures (Over \$100 each payee this period) | | | 100 Mar 200 March 200 Marc | | | | |
| c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and | | | | | | | |
| 20. LOAN REPAYMENTS MADE THIS PERIOD | | | | | | | |
| 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item | 1 12.c.) | | \$ 1642.53 | | | | |
| 22.IN-KIND CONTRIBUTIONS | | a | | | | | |
| 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) | | \$0- | - | | | | |
| b. Itemized Obligations Outstanding (Over \$100 each) | | \$0_ | _ | | | | |
| c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be | shown i item | 12.f.) | \$ -0 - | | | | |

ITEMIZED STATEMENT OF LOANS - CANDIDATE (1:46

| 1. NAME OF CANDIDATE OR COMMITTEE | | | | | | | 2. REPORT COVERING THE PERIOD | | | | |
|--|-----------------------|--------------------|-----------------------------|-----------|---|-----------------------|---|---------------|----------|---|--|
| Terry Duncan | | | | | | | FROM: TO: 7-28-14 | | | | |
| 3. COMPLETE THE APPROPRIATE | ITEMS F | OR EACH I | TEMIZ | ED LOAN (| loans totaling n | nore than \$10 | 0 from any source | during the pe | riod) | | |
| Complete the Following for the Source o | f the Loan | | | | | | | | | | |
| First Name Niddle Name Outstanding (Beginning) | | | | | oan Balance of Period) | Loans Receiv | Loans Loan eceived Payments | | | Outstanding Loan Balance (End of Period) | |
| Last Name/Organization Name — (| | | | | _ | 800 | .00 800.00 | | | | |
| 838 Forrest De | en i | Loan Received For: | | | | Date of Loan 7-10-14 | | | | | |
| Old Hickory | State St All Endor | Zip Code 37/3 | | | unoff (Local Elections Only) e Loan (If more space is needed please attach a page) | | | | | | |
| | | | | | First Name Middle Name | | | | | | |
| Last Name/Organization Name | | | | | Last Name/Org | nanization Na | me | | | | |
| | | | | | East Name/Organization Name | | | | | | |
| Address | | | | | Address | | | | | | |
| City | 3311215-3707 | State | Zip Co | de | 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 Co | de | City State Zip C | | | | | Zip Code | |
| Amount Guaranteed Outstanding | | | | | Amount Guaranteed Outstanding | | | | | | |
| First Name | | Middle Name | | | First Name Middle Name | | | | | Name | |
| Last Name/Organization Name | | | | | Last Name/Organization Name | | | | | | |
| Address | | | 61.75 | | Address | | | | | | |
| City | | State | Zip Co | de | City State Zip Coo | | | | Zip Code | | |
| Amount Guaranteed Outstanding | | | | | Amount Guarar | nteed Outstan | nding | 200 | | | |
| First Name | | Middle Name | | | First Name Mi | | | | Middle | Name | |
| Last Name/Organization Name | | | Last Name/Organization Name | | | | | | | | |
| Address | | | | | Address | | | | | | |
| City | | State | Zip Co | de | City | | *************************************** | | State | Zip Code | |
| Amount Guaranteed Outstanding | | | | | Amount Guarar | nteed Outstan | ding | | | | |
| 4. Totals for all Loans (complete on las (Total loans received should also be shown in | | | ns) | | Outstanding Lo | | Loans Received | Loar Payme | | Outstanding Loan Balance (End of Period) | |
| (Total loan payments should also be shown in i (Total outstanding loan balance should also be s | item 20. on s | ummary page.) | age.) | | -0- | | 800.00 | | | 800.00 | |

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

| | | | | · · · · · · · · · · · · · · · · · · · | THE TOURING | | |
|---|-----------------|-----------------------|---------------------------------------|---------------------------------------|-----------------------|--|--|
| 1. NAME OF CANDIDATE OF COMMITTEE | RING THE PERIOD | | | | | | |
| Terry Dunca | TO: 7-28-14 | | | | | | |
| 3. TOTAL ITEMIZED CAMPAIGN EXPENDITU | ige) | - 0 - | | | | | |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR E | ACH ITEM | IZED EXPENDITURE (| expenditures totaling more than \$100 |) to any payee during the per | iod) | | |
| First Name | Middle Na | me | Purpose of Expenditure | | Amount of Expenditure | | |
| Last Name/Business Name Southerd Post Address 1500 Elm Hill Pike | | | MAILING | 1642.53 | | | |
| | | | | | | | |
| Washville | State | Zip Code 37210 | | | | | |
| First Name | Middle Name | | Purpose of Expenditure | | Amount of Expenditure | | |
| Last Name/Business Name | | 0819 | | | | | |
| Address | | | - | | | | |
| City | State | Zip Code | | | | | |
| | | | | | | | |
| First Name | Middle Nar | ne | Purpose of Expenditure | | Amount of Expenditure | | |
| Last Name/Business Name | | | | | | | |
| Address | | | | | | | |
| City | State | Zip Code | † | | | | |
| | | | | | A | | |
| First Name | Middle Nam | ne | Purpose of Expenditure | | Amount of Expenditure | | |
| Last Name/Business Name | | | | | | | |
| Address | | | 1 | | | | |
| City | State | Zip Code | - | | | | |
| First Name | Middle Nam | ne | Purpose of Expenditure | | Amount of Expenditure | | |
| ast Name/Business Name | | | 1 | | | | |
| Address | | and the second second | | | | | |
| City | State | Zip Code | 1 | | | | |
| First Name | Middle Name | | Purpose of Expenditure | | Amount of Expenditure | | |
| ast Name/Business Name | | | 1 | | | | |
| Address | | | 1 | = | | | |
| Sity | State | Zip Code | 1 | | | | |
| 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 | | | | | 1642-53 | | |