JAN 28 2015 WILSON COUNTY

## CAMPAIGN FINANCIAL DISCLOSURE STATEMENT MISSION

For State and Local Candidates
For Single-Candidate Committees

Fo	r Single-Ca	ndidate	Committ	200	
1. DATE OF REPORT			RCOMMITTEE	- 30	
1-20-7015	Vincentium (	1 Ano	rdshan	)	
2.b. IF COMMITTEE, NAME OF CANDIDATE		7	Leer Leer	3. ELECTION DATE	
1				11-47	~ (1)
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	0.7			1 11 /- 1	014
1305 Rolling Meadow C	City	1. 1	State	Zip Code	Phone
4.b. CANDIDATE'S HOME ADDRESS (if differen	-1, MAZ Jee	Het -	TW ?	57/20 6	15-758-7447
Street or Rural Route	City		State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if	applicable)	6 & NAME	OF POLITICAL	TOTAQUEEN	
Mit . What ( ) cla Commis	31 over 14	her	OFFICIAL	TREASURER (may be	candidate)
7. CATEGORY OR REPORT (Check one)	oner 7		) 114 JI	addaw	
FIRST SECOND THIRD	FOLIDALIA				
QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERAL	MID-YEAR	YEAR-END
8.a. BEGINNING DATE OF REPORTING PERIOD			DATE OF REPOR	SUPPLEMENTAL RTING PERIOD	SUPPLEMENTAL
9. (Check one)			1-15-1	15	
<ul> <li>a. This campaign is exempt from detailed tures total \$1,000 or less for this report</li> </ul>	disclosure because	contributions	(including in-kin	d) received total 64 co.	
	70 03 00 00 00 00				
<ul> <li>This campaign is required to file a deta and/or expenditures total more than \$1</li> </ul>	iled financial disclos	ure because o	contributions (inc	duding in kind)	
and/or expenditures total more than \$1	,000 for this reportin	g period.	orkinodilorio (iric	during in-killa) received	total more than \$1,000
10. I/we do solemply swear or offirm that the inc					
accurate accounting of campaign contribution	ormation contained in	n this campaig	n financial disc	losure report is true an	d that this report is an
I III III DISCIOSURE ACT Additionally I live ou	100r on aff 11 .		P tou by the	carrollate collillillee L	y the Campaign
benefit of the candidate or for any other nonpo	olitical purpose as de	efined by the f	ederal internal re	evenue code.	personal financial
and Bearlo	17.7.	. /	1 - 0	01	
signature of candidate	1-20-2015		Im D	radshaue	1-20-2015
() or a series of spinologic	date	(	signature of	political treasurer	date
11. WITNESS SIGNATURE			J		
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100-1100	1-20-15		hote	- VOAR	1 70 11
signature of witness	date		200	1 kell	1-26-15
			signaturi	e of witness	date
2. SUMMARY			0.1734		
a. BALANCE ON HAND LAST REPORT				_0	-2.
b. TOTAL RECEIPTS THIS PERIOD			\$	0	
c. TOTAL DISBURSEMENTS THIS PERIOD			\$	0	
d. BALANCE ON HAND (12.a. plus 12.b. minus	s 12.c.)			\$	0
e. TOTAL LOANS OUTSTANDING					0
f. TOTAL OBLIGATIONS OUTSTANDING					9
		***************************************		····· \$ —	



## ITEMIZED STATEMENT OF LOANS - CANDIDATE LECTION COMMISSION

CA MINISTER AND ADDRESS OF THE PARTY OF THE							Orange.					
1. NAME OF CANDIDATE OR CO	)MMITTEE						2 DEDO	DT OOVE				
1 -	1-1		2770000				FROM:	RICOVE	RING THE PERIOD			
3 COMPLETE	adSN	01	$\Box$					2014	TO:			
3. COMPLETE THE APPROPRIAT	E ITEMS FO	REAC	H ITEMIZ	ED LOA	N (loans totaling more the	an \$100 from any	source during t	2017	1-15-201			
Complete the Following for the Source	of the Loan		-	of the same		and the orientary of	loance during ti	ie period)				
First Name	Middle Name			0.44								
Sim	1 0000				anding Loan Balance Loans Loan Outstanding Loan Balance							
Last Name/Organization Name					Payments (End of Period)							
Bradshaw				4	998.05 - 998 page							
Address	Λ			Loan Poo	eived For:		170,00	2				
1305 Kolling/11 eao	exi CT	_	- 1				Date of	Loan				
City		Zip Code		☐ Prim	ary Election G	Seneral Election						
Mr. Juliet		37/3	22 1	☐ Rund	off (Local Elections Only)							
Lis					oan (If more space is ne							
First Name	T <sub>M</sub>	iddle Nam	20	ADOVE L		eded please att	ach a page)					
	1 1411	iodie Maii	16		First Name			Middle	Name			
Last Name/Organization Name					Last Name/Organization	n Na						
					Cast Name/Organization	n Name						
Address					Address							
0.1												
City	Sta	ate	Zip Code	9	City			Loui				
Amount Current and Cut II II								State	Zip Code			
Amount Guaranteed Outstanding					Amount Guaranteed Out	standing						
First Name	Section Control of					all and a second						
THOUTENING	Milodie Name				First Name Middle Name							
					Militaria Marine							
Last Name/Organization Name					Last Name/Organization	Name						
Address					l and a significant	TTOTAL C						
Addiess					Address							
City												
	State	)	Zip Code		City			State	Zip Code			
Amount Guaranteed Outstanding			<u> </u>						Lip Gode			
and same same and the same and					Amount Guaranteed Outsl	landing						
First Name	Middle	e Name			Later Control of the		A Control of the Cont					
	Wildel	e Marrie		- 1	First Name			Middle N	ame			
Last Name/Organization Name					Last Name/Organization N	lome						
				- 1	Ecot (Vallic/Organization N	ame						
Address					Address							
Oit.				- 1								
City	State	T	Zip Code		City	-		State	1 3: 0 /			
mount Guaranteed Outstanding								State	Zip Code			
and a design to the control of the c				h	mount Guaranteed Outsta	inding						
iest Name												
irst Name	Middle I	Name		F	irst Name	STOREST CONTRACT		Middle Ne-	ne			
Name/Organization Name				Middle Name								
and the state of t				L	ast Name/Organization Na	me						
ddress									1			
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ity	State	7	ip Code		ih							
Custod Custos de ad Outre			,p 0006	C	rty		- 1	State	Zip Code			
ount Guaranteed Outstanding	Liverior and the second			An	nount Guaranteed Outstan	ding						
Totala for all Lawry		750	110-210				-					
otals for all Loans (complete on last pag	e of itemized	loans)		Ou	Itstanding Loan Balance	Loans	Loan	10:	ata di a la Cara			
al loans received should also be shown in item 16. on summary page.) al loan payments should also be shown in item 20. on summary page.)				(Beginning of Period)	Received	ts Out	standing Loan Balance (End of Period)					
outstanding loan balance should also be shown in item 12.e. on front page.)					998.05	-0	A A -					
SS-1132 (Pay 4/02)			-		110,00		1110	05.	-0			