CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

	r State ar ' Single-Ca				RECEIVED
1. DATE OF REPORT	2.a. NAME OF				This is
7/24/18	101		Ayna	0	JUL 24 2018
2.b. IF COMMITTEE, NAME OF CANDIDATE			<u> </u>	3. ELECTION DATE	WHC
				2018	ELECTION COMMISS
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	0.1			1 2018	
108 wenty	City	× 1 -1	State	Zip Code	Phone
4.b. CANDIDATE'S HOME ADDRESS (if different	MT.	اعرار و	170	3712	
Street or Rural Route	- ·	<u> </u>	State	Zip Code	Phone
108 Wently	Mi	Ja(ref	TW	7712	rnone
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME	OF POLITICAL 1	REASURER (may be c	andidate)
District 16 Carl	Janes,	1		(=, ==	
7. CATEGORY OR REPORT (Check one)	<u> </u>	<u> </u>			
FIRST SECOND THIRD	FOURTH	PRE-	PRE-	☐ MID-YEAR	YEAR-END
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY	GENERAL	SLIPPLEMENTAL	SUPPLEMENTAL
7-1-18			DATE OF REPOR		
9. (Check one)			(U)-18	<u> </u>	
tures total \$1,000 or less for this reportion b. This campaign is required to file a detail and/or expenditures total more than \$1,4 10. I/we do solemnly swear or affirm that the information accurate accounting of campaign contributions Financial Disclosure Act. Additionally, I/we switch benefit of the candidate or for any other nonposing signature of candidate 11. WITNESS SIGNATURE signature of witness	led financial discle 000 for this report rmation contained and expenditures	in this campaig	ontributions (incompositions) and financial discharge reported by the ntributions have ederal internal response of particular and particular	osure report is true and candidate committee by	that this report is an
2. SUMMARY			······································		date
a. BALANCE ON HAND LAST REPORT			·····\$	21.57	
b. TOTAL RECEIPTS THIS PERIOD	·····		و و ا	513.71.	
c. TOTAL DISBURSEMENTS THIS PERIOD			s (334.78	
d. BALANCE ON HAND (12.a. plus 12.b. minus	; 12.c.)			·····\$	6
e. TOTAL LOANS OUTSTANDING					<i>D</i>
f. TOTAL OBLIGATIONS OUTSTANDING					ф



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14 PEROPT COV	/EDINO TUE DES
<u> </u>	FROM: 1-1-18	VERING THE PERIO
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)		10: 7-23-19
a. Unitemized Contributions (\$100 or less from each source this period)	. Ø	
b. Itemized Contributions (over \$100 from each source this period)	819 71	
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		\$ _ Q(1 - 71
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.)		634.28
20. LOAN REPAYMENTS MADE THIS PERIOD		4
1. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		
22.IN-KIND CONTRIBUTIONS		, - , 1 - 0
a. Unitemized in-kind contributions (\$100 or less from each source this period).	, 6	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	. 6	
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.		(4)
3. OBLIGATIONS	·) ·······	
u. Unitemized Obligations Outstanding (\$100 or less each)	, b	
. Itemized Obligations Outstanding (Over \$100 each)		
TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item		(t)



Page 2 of 4

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITT	EΕΛ	n		2. REPORT CO	VERING THE PERIOD
1. NAME OF CANDIDATE OR COMMITTE		FROM: 7-1-1	18 TO: 7-23-/8		
3. TOTAL ITEMIZED CAMPAIGN CONTR	BUTIONS	FROM PRECEDING	G PAGE (enter \$0 if first itemized a	nage)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FO	R EACH I	EMIZED CONTRIBUT	TION (contributions totaling more than	\$100 from any contrib	utor)
First Name 1090	Middle	Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		<u> کعدم اد ک</u>	Primary Election	General Election	813.71
Address 108 wen 5/7 Lave		Runoff (Local Election	Runoff (Local Elections Only)		
City My. Juliet			Date of Contribution	Date of Contribution	
Occupation VP Product			1/3/18	1 12/10	
Employer Trens Cure	····	4,740	713110		1113.77
First Name	Middle	Name	Contribution Received For:		
Last Name/Organization Name				10 45 4	Amount of Contribution
			La Primary Election L	General Election	
Address			Runoff (Local Elections	s Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
Cinthia	i				
First Name Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name			Primary Election	General Election	
Address			Runoff (Local Elections	Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
mployer			_		
irst Name	Middle Nar	ne	Contribution Received For:		Amount of Contribution
ast Name/Organization Name	<u> </u>		Primary Election G	General Election	
ddress			Runoff (Local Elections O	only)	
ity	State	Zip Code	Date of Contribution		Aggregate This Election
ccupation	l	<u> </u>	-		
nployer					
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of the thing is the last page of contributions, this amount must it	of this form an	e used.) em 15b. of summary.)			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OF	RCOMMITTEE	.0		2. REPORT COVERING THE PERIOD
				FROM: 7-1-18 TO: 7-23-18
4. COMPLETE THE APPROPRIA	TE ITEMS FOR EACH I	FROM PRECEDING	G PAGE (enter \$0 if first itemized pa URE (expenditures totaling more than \$100	
First Name		le Name	Purpose of Expenditure	erreigne etigtigsvegt voor egigt met gewere in en als de beste mit een gesterreiden gemeel de mysterreide
Last Name/Business Name	A 0 Y	· · · · · · · · · · · · · · · · · · ·	· _	Amount of Expenditure
Address	Annex 14. Juliet		Pustal Se	rvices
City City				561-44
MT. Julie	+ State	U 37122	-	
First Name	Middle	Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name	Last Name/Business Name UTSta Pri wt		Post Card	-5
Addrona	AN Stree	<u> </u>	- and pos Service	11 272-84
City	State	Zip Code		> (
Walthon	m.	f ozuer	34010	-5
First Name	Middle	Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name				
Address				
City	State	Zip Code		
First Name	Middle N	ame	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name				
Address	<u> </u>			
City	State	Zip Code		
		Lip oode		
irst Name	Middle Na	me	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name				
ddress	· · · · · · · · · · · · · · · · · · ·		_	
ity	State	Zip Code		
	Over	Zip Code		
irst Name	Middle Nan	ne	Purpose of Expenditure	Amount of Expenditure
st Name/Business Name			-	
ldress			-	
у	State	Zip Code		
TOTAL ITEMIZED EXPENDIT (Carry forward to item 3, of next page if at (If this is the last page of expenditures, this	dditional pages of this form a	re used.)		834-29