

CAMPAIGN FINANCIAL DISCLOSURE STATES Ear State and Local Candidates

<u>-</u> 2	or State and	Local Candid didate Commi	ates ttees	ELECTION COMMISSI
Fo	r single-can	NDIDATE OR COMMITTE	F	
1. DATE OF REPORT	_00b	Jandura	La	
10/31/14	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Danana	3. ELECTION DATE	
2.b. IF COMMITTEE, NAME OF CANDIDATE			11141	14
TOTAL AND DIJONE				Discord
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	State	Zip Code	615.336.0936
534 Ridge crest Lane	Lebanan,	TN	37087	6/3.306.0136
4 b CANDIDATE'S HOME ADDRESS (if differ	rent than 4.a.)	State	Zip Code	Phone
Street or Rural Route	City	TAI	37087	615.336.0936
534 Ridgecrest Lane	lebanon	6. NAME OF POLIT	ICAL TREASURER (may be	
5. OFFICE SOUGHT (include district number			Jandura	
	Nard 6	Dan	Our por a	
7. CATEGORY OR REPORT (Check one)			= MID-YEAR	YEAR-END
FIRST SECOND THIR		PRE- PRI PRIMARY GENE	RAL SUPPLEMENTAL	SUPPLEMENTAL
QUARTER QUARTER QUART 8.a. BEGINNING DATE OF REPORTING PERIOD	ER QUARTER	8.b. ENDING DATE OF	REPORTING PERIOD	
4/01/14		6/30/	14	
g. (Check one)	tailed disclosure hecall	se contributions (includin	g in-kind) received total \$1,0	00 or less AND expendi-
a. This campaign is exempt from de tures total \$1,000 or less for this	reporting period. (Com	plete items 12d., 12e. an	d 12f.)	
b. This campaign is required to file a	dotailed financial disc	losure because contribut	ions (including in-kind) receiv	ed total more than \$1,000
 b. This campaign is required to file a and/or expenditures total more th 	an \$1,000 for this repo	rting period.		
10. I/we do solemnly swear or affirm that t	he information containe	ed in this campaign finan	cial disclosure report is true	and that this report is an
accurate accounting of campaign contri	DULIOUS AND EXPENDITOR	t se compoian contribution	ons have been expended for	the personal financial
Financial Disclosure Act. Additionally, benefit of the candidate or for any othe	r nonpolitical purpose a	is defined by the federal	internal revenue code.	
Delient of the delication	106.1	\sim	- 1M Declo	10/31/14
I hat Manh	10/31/14	1	nature of political treasurer	date
signature of candidate	date	sign	nature of political treasurer	
Dollar Landine	10/31/19	1		
11. WITNESSIGNATURE				1.1.1
16 M Mande	10/31/	DU MA	10, XX and	111/2 10/31/14
Maller Maral	2/2	.77	signature of witness	1114 1931119
signature of witness	date			0 193119 date
				001-1-1
				001-1-11-1
12. SUMMARY			<u>^</u>	001-1-11-1
12. SUMMARY a BALANCE ON HAND LAST REPOR	RT		<u>^</u>	001-1-11-1
a. BALANCE ON HAND LAST REPOR			s 6	001-1-11-1
12. SUMMARY a. BALANCE ON HAND LAST REPOR			s 6	001-1-11-1
a. BALANCE ON HAND LAST REPOR			\$ <u>6</u> \$ <u>900.0</u> \$ 735.9	001-1-11-1
 a. BALANCE ON HAND LAST REPOR b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PER 	RIOD		\$ 00.0 \$ 735.9	0 2
 a. BALANCE ON HAND LAST REPOR b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PER 	RIOD		\$ 00.0 \$ 735.9	0 2
a. BALANCE ON HAND LAST REPOR b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PER d. BALANCE ON HAND (12.a. plus 1	RIOD		\$ 00.0 \$ 735.9	0 2
a. BALANCE ON HAND LAST REPOR b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PER d. BALANCE ON HAND (12.a. plus 1	RIOD		\$ 00.0 \$ 735.9	0 2
 a. BALANCE ON HAND LAST REPOR b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PER 	RIOD		\$ 0 \$ 900.0 \$ 735.9	O 2 s 164.03 s 800.00





SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT CO	VERING THE PERIOD
13. NAME OF CANDIDATE OR COMMITTEE (MY 1977)		FROM:	TO:
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)			
a Uniterpized Contributions (\$100 or less from each source this peri	iod)	\$	
h Itamized Contributions (over \$100 from each source this period)		\$	00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.	a. and 15.b.).		\$ 700.00
16. LOANS RECEIVED THIS REPORTING PERIOD	*****************	***************************************	\$ <u>800.00</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD			\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item	12.b.)		s <u>900.00</u>
DISBURSEMENTS			
19. EXPENDITURES (other than loan payments)			
a. Expenditures (\$100 or less each payee this period) (must be listed	by category -	e.g., printing, postaç	je, gasoline)
	\$	***************************************	
	\$		
	\$	Accounts on the Tity.	
	\$		
	\$	and an interior	
	\$		
	\$		
	\$		
	\$	ingranament (APA)	
		. 135.9	7
Total of Expenditures (\$100 or less each payee)		\$ 600 0	20
b. Itemized Expenditures (Over \$100 each payee this period)			\$ <u>735.97</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. a			_
20. LOAN REPAYMENTS MADE THIS PERIOD			235.97
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in	item 12.c.)		5
22.IN-KIND CONTRIBUTIONS			
a. Unitemized in-kind contributions (\$100 or less from each source th	is period)	\$	
b. Itemized in-kind contributions (over \$100 from each source this pe			
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (ad	d 22.a. and 22	2.b.)	\$
23. OBLIGATIONS		2	
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.) (mus	st be shown i it	tem 12.f.)	\$



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE COUNTY

THE OR COMMITTEE			2. REPORT COVER	
1. NAME OF CANDIDATE OR COMMITTEE	FROM: 4/1/14	TO: 6/30/14		
	2110 5001	* DDECEDING DA	CE (aptor \$0 if first itemized page)	Amount
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTI	ONS FROM	D CONTRIBUTION	(contributions totaling more than \$100 from any contributo	r)
	Middle Name	ED CONTRIBOTION	Contribution Received For:	Amount of Contribution
First Name	Middle Harric			\$100.00
Last Name/Organization Name			Primary Election General Election	W/00.00
Keene			Runoff (Local Elections Only)	
Address 400 Five Oaks Blud	,			Aggregate This Election
CityLebanon	State	Zip Code 37087	Date of Contribution	Aggregate This Election
Occupation			5/29/14	7/00.00
Employer				
First Name	Middle Nam	e	Contribution Received For:	Amount of Contribution
Last Name/Organization Name	1		Primary Election General Election	
Address	1		Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Employer				
First Name	Middle Nam	e	Contribution Received For:	Amount of Contribution
Last Name/Organization Name			Primary Election General Election	
0			Duraff / pool Elections Only)	
Address			Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Employer				
First Name	Middle Nar	me	Contribution Received For:	Amount of Contribution
			☐ Primary Election ☐ General Election	
Last Name/Organization Name			Runoff (Local Elections Only)	
Address		T		Aggregate This Election
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Employer				
5. TOTAL ITEMIZED CONTRIBUTIONS	use of this form	are used)	*	#/00.00
(Carry forward to item 3. of next page if additional page (If this is the last page of contributions, this amount m	ust be shown i	n item 15b. of summary.))	700.00





ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

THE OF COMMITTEE				2. REPORT COVER	RING THE PERIOD			
1. NAME OF CANDIDATE OR COMMITTEE				FROM:4/114	TO: 6/30/14			
Dan Jandura		A DDECEDING DAGE	- (onter \$0 if first itemized no	age)	Amount			
3. TOTAL ITEMIZED CAMPAIGN EXPENDITUR 4. COMPLETE THE APPROPRIATE ITEMS FOR EA	RES FROM	PRECEDING PAGE	voenditures totaling more than \$10	0 to any payee during the pe	riod)			
4. COMPLETE THE APPROPRIATE ITEMS FOR EA			Purpose of Expenditure		Amount of Expenditure			
First Name	Middle Name	9	I diposo si ziip		#			
Last Name/Business Name Print			Prihhug		90.97			
Address T. House)					
City	State	Zip Code						
	I		Purpose of Expenditure		Amount of Expenditure			
First Name	Middle Nam	ie	Talpood of Experience		4			
Blue Devil Booster C	lub		Advertis	ina	\$45.00			
Address Pox 253								
City Lebanon. TN	State TV	Zip Code 37088						
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure			
			-		\$ 000			
Last Name/Business Name Advance 519ns Address	,		Signs		600.00			
1005 West Mains	TState	Zip Code	4					
Lebanon	IN	37087						
First Name	Middle Nar	me	Purpose of Expenditure		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			7					
Address								
City	State	Zip Code						
			D		Amount of Expenditure			
First Name	Middle Na	ame	Purpose of Expenditure		Turistical angularist			
Last Name/Business Name								
Address								
City	State	Zip Code						
5. TOTAL ITEMIZED EXPENDITURES		The second secon			735.97			
(Carry forward to item 3. of next page if additional page (If this is the last page of expenditures, this amount r	ges of this for	m are used.) n in item 19b, of summarv.)			133.7/			
(If this is the last page of expenditures, this amount i	Huat be allow							



WILSON COUNTY ITEMIZED STATEMENT OF LOANS - CANDIDATE COMMISSION

II I E I AT I	Man that the						2 RF	PORT C	OVERING	THE	PERIOD
. NAME OF CANDIDATE OR COM	VITTEE						FROI		TO		30/14
							141	1/14	ind)	01	30//4
Han Jandures. COMPLETE THE APPROPRIATE	ITEMS FOR	REACH ITE	MIZE	ED LOAN (loa	ns totaling r	nore than \$100 from ar	ny source di	ing the per	100)		
										ding Los	n Balance
Complete the Following for the Source of First Name	Middle Name			Outstanding Loa (Beginning of	an Balance Period)	Loans Received	Loa Paym		W (E	nd of Pe	riod)
Dan				(Bogining)		800.00		3	1 4 6	800	00.0
ast Name/Organization Name				0		0000	1	Date of Loa	an .		
Address	1 /			Loan Received		General Election	00		-/9	/ ,	,,
534 Ridge CIE	34 Ridge crest Lane Primary State Zip Code Runoff(5	19	/ /	9
City Lehanon	TN	Zip Code 37087		☐ Runoff (L			attach	2 2200/			
Li	st All Endorse	ers or Guarai	ntors f	or Above Loan	(If more s	pace is needed plea	ase allacin	a hage)	Middle N	ame	
First Name		Middle Name			First Name						
					Last Name/	Organization Name					
Last Name/Organization Name					Address						
Address					Vagioso				Tout	- 1:	Zip Code
City		State	Zip (Code	City				State	1	Th Cone
City					Amount Gu	aranteed Outstanding					
Amount Guaranteed Outstanding									Middle	Name	
First Name	- 104W	Middle Name	е		First Name						
					L not Name	/Organization Name				,	
Last Name/Organization Name											
Address					Address						
		State	Zip	Code	City				State		Zip Code
City		Julia			A	uaranteed Outstanding	0				
Amount Guaranteed Outstanding					Amount	ualanteed outstanding	3				
		Middle Nar	ne		First Nan	ne			Midd	le Name	
First Name					Last Nan	ne/Organization Name					
Last Name/Organization Name					Louisse						
Address					Address						
/ dolloss		State	17	ip Code	City				Stat	e	Zip Code
City		State		.,		O Culatandi	ina				<u> </u>
Amount Guaranteed Outstanding					Amount	Guaranteed Outstandi	9				
		Middle Na	ame		First Na	me			Midd	ile Name	
First Name		IVIIGGIE IN					10				
Last Name/Organization Name					Last Na	me/Organization Nam	IC.				
Allega					Addres	S					
Address				7:-0-1:	City				Sta	te	Zip Code
City		State		Zip Code	1		alia m				<u></u>
Amount Guaranteed Outstanding					Amoun	t Guaranteed Outstand	uing				
4. Totals for all Loans (complete of	on last page	of itemized	loan	s)	Outsta	inding Loan Balance	Loan		Loan	Ot	itstanding Loan Baland (End of Period)
(Total loans received should also be sho	wn in item 10.	on summary p	page.)		(Be	ginning of Period)	Received 4 901		Payments		800-00
(Total loan payments should also be sho (Total outstanding loan balance should al	so be shown in	item 12.e. on	front pa	age.)		4	7 800	000	18		100.00