APR 8 2014

# CAMPAIGN FINANCIAL DISCLOSURE STATEME

For State and Local Candidates
For Single-Candidate Committees

4 DATE OF DEPONT	1 -				
1. DATE OF REPORT 4-7-14	2.a. NAMEOFO	CANDIDATE OR	COMMITTEE	Asho	
2.b. IF COMMITTEE, NAME OF CANDIDATE	1	0 -	ICIT	3. ELECTION D.	ATE
4.a. CAMPAIGN ADDRESS AND PHONE	he				
Street or Rural Route	City		State	Zip Code	Phone
1284 Holloway Rd.	Lebanon		TN	37090	615-547-7880
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	than 4.a.) City		State	Zip Code	
Same			51415	z.p oodc	Phone
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME	OF POLITICAL T	REASURER (may	be candidate)
7. CATEGORY OR REPORT (Check one)	Comm.		IERA	ey Ashe	
FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE-	PRE- GENERAL	MID-YEAR SUPPLEMENT	YEAR-END
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING	DATE OF REPOR	RTING PERIOD	AL SUPPLEMENTAL
9. (Check one)		M	trch 31	,2014	
a. This campaign is exempt from detailed tures total \$1,000 or less for this report b. This campaign is required to file a deta and/or expenditures total more than \$1  10. I/we do solemnly swear or affirm that the information accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we subenefit of the candidate or for any other nonpositions.	prince (Comp illed financial disclo ,000 for this reporti prince contained s and expenditures wear or affirm that re	sure because ng period.  in this campais required to be no campaign of	ign financial discle reported by the ontributions have federal internal re	luding in-kind) reco	eived total more than \$1,000 e and that this report is an
11. WITNESS SIGNATURE	(-17		Char	Physical	4-7-14
signature of witness	date		signatur	e of witness	date
12. SUMMARY				110 4	
a. BALANCE ON HAND LAST REPORT			\$	40,261	1.13
b. TOTAL RECEIPTS THIS PERIOD					_
c. TOTAL DISBURSEMENTS THIS PERIOD			\$	780.	
d. BALANCE ON HAND (12.a. plus 12.b. mini	us 12.c.)				<u>\$ 39,481.13</u>
e. TOTAL LOANS OUTSTANDING					\$
f. TOTAL OBLIGATIONS OUTSTANDING					\$
The second secon					



#### SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
RECEIPTS Friends of Terry HShe	FROM: 1-16-14 TO: 3-31-14
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	s
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ O
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	g., printing, postage, gasoline)
\$	
<del></del> \$	
	16.
\$	
Total of Expanditures (\$100 or less seek ways)	- 100 00
Total of Expenditures (\$100 or less each payee)	
b. Itemized Expenditures (Over \$100 each payee this period)	700.00 700.00
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>780 °0</u>
which are some difference (4 for or less from each source this period)	
(over production 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)\$	
b. Itemized Obligations Outstanding (Over \$100 each)\$	
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12	2.f.)s

WILSON COUNTY ELECTION COMMISSION

### ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR CO	DMMITTEE 1	2. REPORT CO	VERING THE PERIOD
F	riends of Terry A	FROM: 1-16-1	V TO: 3-31-1V
3. TOTAL ITEMIZED CAMPAIGN	CONTRIBUTIONS FROM PRECEDING	G PAGE (enter \$0 if first itemized page)	Amount
4. COMPLETE THE APPROPRIATE I	TEMS FOR EACH ITEMIZED CONTRIBUT	TION (contributions totaling more than \$100 from any contributions	utor)
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		☐ Primary Election ☐ General Election	Control Contro
[ Addus - ]	1		
Address		Runoff (Local Elections Only)	
City	State Zip Code	Date of Contribution	Aggregate This Election
Occupation		_	
Employer			
		1	
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		☐ Primary Election ☐ General Election	A CONTRIBUTION
		General Election	
Address		Runoff (Local Elections Only)	
City	State Zip Code	Date of Contribution	Aggregate This Election
Occupation		-	20 50 50 7 7 7 2 7 2 7 7 7 7 7 7 7 7 7 7 7 7 7
mployer			-
- Inpoyer			
irst Name	Middle Name	Contribution Received For:	Amount of Contribution
ast Name/Organization Name		☐ Primary Election ☐ General Election	- Sontibution
		General Election	
ddress		Runoff (Local Elections Only)	
ty //	State Zip Code	Date of Contribution	Aggregate This Election
cupation		_	
ployer			
F7-7			
ot Name	Middle Name	Contribution Received For:	Amount of Contribution
t Name/Organization Name		☐ Primary Election ☐ General Election	7 Thount of Contribution
		Primary Election General Election	l.
dress		Runoff (Local Elections Only)	
1 1/1	State Zip Code	Date of Contribution	Aggregate This Election
upation		-	20 0 2.00001
loyer		_	
TOTAL ITEMIZED CONTRIBUTION	NS		
(Carry forward to item 3. of next page if addition	onal pages of this form are used.)		
in this is the last page of contributions, this an	nount must be shown in item 15b. of summary.)		



# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COM Frends	MITTEE	2. REPORT CO	OVERING THE PERIOD
ryanas	of leng 11she	FROM: [-16-	14 TO: 3 31-14 Amount
3. TOTAL ITEMIZED IN-KIND CONT	RIBUTIONS FROM PRECEDIN	G PAGE (enter 50) it tirst itemized nage)	1
4. COMPLETE THE APPROPRIATE ITEM	IS FOR EACH ITEMIZED IN-KIND (	CONTRIBUTION (in-kind contributions totaling more than \$100 from a	ny contributor during the period)
First Name	Middle Name	In-Kind Contribution Received For:	Value of In-Kind Contribu
Last Name/Organization Name		Primary Election General Election	
Address		Runoff (Local Elections Only)  Date of In-Kind Contribution	
Dity //	State Zip Code		Aggregate this Election
occupation	mployer	Description of In-Kind Contribution	
	проус		
rst Name	Middle Name	In-Kind Contribution Received For:	
st Name/Organization Name		Primary Election General Election	Value of In-Kind Contribut
		Runoff (Local Elections Only)	
ddress		Date of In-Kind Contribution	Aggregate this Election
ty V/A	State Zip Code	Description of In-Kind Contribution	
cupation	nployer		
st Name	Middle Name	In-Kind Contribution Received For:	Value of In-Kind Contribution
st Name/Organization Name		Primary Election General Election	Table of in Mind Contribution
dress	•	Runoff (Local Elections Only)	
[0/1		Date of In-Kind Contribution	Aggregate this Election
	State Zip Code	Description of In-Kind Contribution	
cupation Emp	oloyer		
Name	Middle Name	In-Kind Contribution Received For:	Value of In-Kind Contribution
Name/Organization Name		Primary Election General Election	
ress		Runoff (Local Elections Only)  Date of In-Kind Contribution	
	State Zip Code		Aggregate this Election
pation		Description of In-Kind Contribution	
pation ' Empli	Jyei		
ame	Middle Name	In-Kind Contribution Received For:	
ame/Organization Name	ASSISSES ASSISTANCE AND	Primary Election General Election	Value of In-Kind Contribution
		☐ Runoff (Local Elections Only)	
SS N/A		Date of In-Kind Contribution	Aggregate this Election
1 //	State Zip Code	Description of In-Kind Contribution	
ation Employ	rer	<b></b>   2	
OTAL ITEMIZED IN-KIND CONTRIBUTION OF A CONTRIBUTION OF THE CONTRI	JTIONS		
this is the last page of in-kind contributions, this a	amount must be shown in item 22b. of sur	mmary.)	
SS-1128 (Rev. 2/06)		Page of	RDA 1159

APR 8 2014 «
WILSON COUNTY 11:45
ELECTION COMMISSION

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COM	MITTEE	. 1		2. REPORT COV	ERING THE PERIOD
Friends				FROM: 1-16-1	14 TO: 3-31-14 Amount
3. TOTAL ITEMIZED CAMPAIGN EX	PENDITURES F	ROM PRECEDING PA	AGE (enter \$0 if first itemized pa	age)	7000
4. COMPLETE THE APPROPRIATE ITEI			(expenditures totaling more than \$100	) to any payee during the	period)
First Name	Middle f	Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Proceeds	Bible	, s			
Address			DONATION	V	50.00
P.O. B.	OV 59	, Zip Code	DONATION (FRANKIN)		
Lebanon	TU	37087	CHRANKIN,		
First Name	Middle N	ame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	0:11		_		
Address Dideons	Bible.	<u>S</u>	Denation	m)	
City P.O. Boy		Taran	DonAtion (Sanforce	1)	50.00
Lebanon	State	Zip Code 37087	(Santore	<b>D</b>	
First Name	Middle Na		Purpose of Expenditure		
ast Name/Business Name			- urpose of Experialitie		Amount of Expenditure
Clara	Byrd				
3717 Belotus		1.	Donatio	N	500 00
ity	State	Zip Code	1		
Lebanon	TW	37087			
irst Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name			1	,	
Idress	<u> </u>		Web Constr www Ashe Die	retion	18000
W. III E. Main S	State	Zip Code	WWW Ashe Dig	trict (Licon	
Lebanon	TN	37087			
st Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
st Name/Business Name					randalit of Experiolitie
dress					
1	State	Zip Code	e a company		
st Name	Middle Name		Purpose of Expenditure		Amount of E
Name/Business Name			,		Amount of Expenditure
ress					
	State	Zip Code			
TOTAL ITEMIZED EXPENDITURES					
(Carry forward to item 3. of next page if additional (If this is the last page of expenditures, this amoun	pages of this form are	used.)			
00 4400 /D 4/00)					



#### **ITEMIZED STATEMENT OF LOANS - CANDIDATE**

1. NAME OF CANDIDATE OR COM	MITTEE					-	_	2	REPORT	COVE	DING	THE DEDICE
Friends of Term 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LO					A STATE OF THE STA					COVERING THE PERIOD TO:		
3. COMPLETE THE APPROPRIATE	ITEMS F	OR EACH	ITEMIZ	ZED LOAN	(loans totaling r	nore than	\$100 from an	11.	-16-1	14		3-31-14
Complete the Following for the Source of the			A. F. 187-		(really totaling in	nore trian	\$100 HOITI all	y sourc	e during the p	perioaj		
Et and	Middle Nam	ne		Outstanding	Loan Balance	Lo	oans		Loan	1 00	itetandi	ng Loan Balance
Look News (Our seize III - 1)				(Beginning	ning of Period) Received			Payments				of Period)
Last Name/Organization Name												
Address			-	Loan Recei	ved For:				Date of Lo	an		
City	City State Zip Code			☐ Prima	mary Election General Election							
					(Local Elections (							
	All Endors	sers or Gua	rantors fo	r Above Loa	an (If more spac	ce is nee	eded please	attach	a page)			
First Name		Middle Nam	ie		First Name					Middle	e Name	
Last Name/Organization Name	/	/			Last Name/Org	anization	Name					
Address					Address							
City		State	Zip Coo	de	City					State		Zip Code
Amount Guaranteed Outstanding		1			Amount Guarant	teed Outs	tanding					
First Name / Middle Name					First Name Middle Name							
Last Name/Organization Name					Last Name/Orga	nization N	Name					
Address					Address							
City		State	Zip Code	е	City State Zip Code					Zip Code		
Amount Guaranteed Outstanding					Amount Guarante	eed Outsta	anding					
First Name	1	Middle Name			First Name					Middle	Name	
Last Name/Organization Name					Last Name/Organ	nization N	ame					
Address		39708		ľ	Address							
City	S	State	Zip Code		City				I	State	T	Zip Code
mount Guaranteed Outstanding		15		A	Amount Guarante	ed Outsta	nding					
First Name Middle Name First Name						irst Name Middle Name						
ast Name/Organization Name				L	ast Name/Organi	zation Na	ame					
ddress		-		A	ddress							
ity	St	tate	Zip Code	C	City State Zip				ip Code			
ount Guaranteed Outstanding					Amount Guaranteed Outstanding							
Totals for all Loans (complete on last page of itemized loans)  Total loans received should also be shown in item 16. on summary page.)  Total loan payments should also be shown in item 20. on summary page.)  Total outstanding loan balance should also be shown in item 12.e. on front page.)				0	utstanding Loan I (Beginning of Pe	Outstanding Lo			ding Loan Balance ad of Period)			



### ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE  Friends of Cerry Ashe  3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED			2. REPORT COVERING THE PERIOD				
Fr	PNds ut	lerry HSL	1e	FROM:/-16-	/4 TO:	3-31-14	
COMPLETE THE APPROPRIA     OBLIGATION (obligations total     person/vendor at the end of the	ing more than \$100	CH ITEMIZED owed to any	Outstanding Balance (Beginning of Period)	Debt Incurred	Payments This Period	Outstanding Balance (End of Period)	
First Name	Middle	Name					
Last Name/Business Name			-				
Address			-	E)			
City	State	Zip Code	-				
Description of Obligation							
First Name	Middle I	Name /					
Last Name/Business Name							
Address	X	/ /					
City	State	Zip Code	h				
Description of Obligation	///		7				
First Name	Middle N	ame /					
Last Name/Business Name	<b>V</b>		-				
Address		-	-				
City	State	Zip Code	1 1				
Description of Obligation	Otale	Zip Code					
Description of Obligation							
First Name	Middle Na	me					
ast Name/Business Name							
ddress							
City	State	Zip Code					
Pescription of Obligation							
•							
Irst Name	Middle Nar	ne			T		
st Name/Business Name			8				
dress							
ty	State	Zip Code			1		
scription of Obligation							
TOTALS							
TOTALS Total from Outstanding Balance - (End of in item 23b. on summary page.)	Period) column must	also be shown					