JUL 8 - 2014



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

A CATE COLORED	aldate collillities
1. DATE OF REPORT JULY 5 2014 2.a. NAME OF CA FOLER	NDIDATE OR COMMITTEE
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE
4.a. CAMPAIGN ADDRESS AND PHONE	Aug 7 2014
Street or Rural Route City	Ctate 7: 0 l
P.O. Box 2131 Lebano	State Zip Code Phone 7.0 37088 547-7888
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)	00 077 7080
Street or Rural Route 1284 Holloway Rd, Lebano,	State Zip Code Phone 7
OFFICE SOUGHT (include district number, if applicable)	NAME OF POLITICAL TREASURER (may be candidate)
DISTRICT 12 Co. Comm.	Terry Ashe
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD FOURTH	
CHARTER	PRE- PRE- MID-YEAR YEAR-END PRIMARY GENERAL SUPPLEMENTAL
GOTTIEN GOATTEN	PRIMARY GENERAL SUPPLEMENTAL SUPPLEMENTAL 8.b. ENDING DATE OF REPORTING PERIOD
April 1 2014	June 30 2014
9. (Check one)	
 This campaign is exempt from detailed disclosure because tures total \$1,000 or less for this reporting period. (Comple 	contributions (including in-kind) received total \$1,000 or less AND expendite items 12d., 12e, and 12f.)
	- CONTROL - CONT
and/or expenditures total more than \$1,000 for this reporting	are because contributions (including in-kind) received total more than \$1,000 period.
	this campaign financial disclosure report is true and that this report is an equired to be reported by the candidate committee by the Campaign campaign contributions have been expended for the personal financial fined by the federal internal revenue code.
1eun Whe 7-5-14	10. (6/4)
signature of cardidate date	signature of political treasurer date
, and	date date
11. WITNESS SIGNATURE Country L. Halbert 7-5-14 signature of witness date	Country L. Halbert 7-5-14 signature of witness date
12. SUMMARY	
	70 1/0/ 2
a. BALANCE ON HAND LAST REPORT	- C - C - C - C - C - C - C - C - C - C
b. TOTAL RECEIPTS THIS PERIOD	\$ 2,000,00
b. TOTAL RECEIPTS THIS PERIOD	\$ 2,037.94
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	
e. TOTAL LOANS OUTSTANDING	
f. TOTAL OBLIGATIONS OUTSTANDING	\$



JUL 8 - 2014 4 11:00 WILSON COUNTY **ELECTION COMMISSION**

SUMMARY PAGE - CANDIDATE

		The state of the s
13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVER	
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	FROM: 4-1-14	TO: 6 -30-14
a. Unitemized Contributions (\$100 or less from each source this period)		
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.)		
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.)	\$	2,000
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, gas	soline)
US POST Office \$ 441.	45	
A Plus Printing \$ 251.	38	
Tomy Aparla - Disable Child. 013 \$ 150.		
Wilson 6. 4H \$ 120.	00	
A Plus Printag \$ 331.	 -	
Habitat for Numaity \$ 7000		
0.5. Post Office \$ 426.		
A Plus Printing \$ 1170		
4	<u> </u>	
Total of Expenditures (\$100 or less each payee)	\$	
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 2037.94	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$	2037.94
20. LOAN REPAYMENTS MADE THIS PERIOD	\$_	0
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	·····\$ _	203794
22.IN-KIND CONTRIBUTIONS		
a. Unitemized in-kind contributions (\$100 or less from each source this period)	<u> </u>	
b. Itemized in-kind contributions (over \$100 from each source this period)	2,000	
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) .		0
3. OBLIGATIONS		
a. Unitemized Obligations Outstanding (\$100 or less each)		
o. Itemized Obligations Outstanding (Over \$100 each)	Market and the Market and American and Ameri	
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 1.		



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDA	TE OR COMMITTEE	(-	- 10)	2. REPORT COV	ERING THE PERIOD
						TO: 6-30-14
3. TOTAL ITEMIZED CA	MPAIGN CONTRIBI	JTIONS F	ROM PRECEDING F	PAGE (enter \$0 if first itemized	page)	
First Name	OPRIATE ITEMS FOR	Middle N		N (contributions totaling more than	\$100 from any contribut	AND THE RESIDENCE OF THE PARTY
		INIOGIE IA	ane	Contribution Received For:	/	Amount of Contribution
	1.0572				General Election	2,000.00
225	Ben Allen	o Re	1.	Runoff (Local Election	ns Only)	
Nashvi Nashvi		State 7 N	Zip Code 37207	Date of Contribution		Aggregate This Election
Occupation				4.23-1	14	
Employer						
First Name		Middle Na	ame	Contribution Received For		Amount of Contribution
Last Name/Organization Name				Primary Election	General Election	
Address				Runoff (Local Election	ns Only)	
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation				1		
Employer				-		
First Name		Middle Nan	ne	Contribution Received For:		Amount of Contribution
Last Name/Organization Name				Primary Election	General Election	
Address				Runoff (Local Elections	s Only)	ti .
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation		1		-		
mployer				-		
in N						
irst Name		Middle Nam	e	Contribution Received For:		Amount of Contribution
ast Name/Organization Name				☐ Primary Election ☐	General Election	
ddress				Runoff (Local Elections	Only)	
ity		State	Zip Code	Date of Contribution		Aggregate This Election
ccupation						
nployer						
. TOTAL ITEMIZED CON (Carry forward to item 3. of next (If this is the last page of contrib	page if additional pages o	f this form are	e used.)			

JUL 8 - 2014 &
WILSON COUNTY 11:00
ELECTION COMMISSION

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		A	2 DEDODE COVE	
Friends	s of Terry	Ashe	2. REPORT COVER	TO:6-30-14
	(Amount
TOTAL ITEMIZED CAMPAIGN EXPENDITAL COMPLETE THE APPROPRIATE ITEMS FOR				
First Name			to any payee during the per	riod)
	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name U, S. Post Office	e	Postage		441.45
Address GAYST.		rostage		
City Lebanon	State Zip Code 37087			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Pointing				251.38
Address 133 Public Sa		Printin	19	231. 38
City Lebanon	State Zip Code 7N 37087			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Busingss Name				- Contract of the second of the second
Appala		DonAtion		15000
Address 347 Oppossum	Hollow Rd.	Disable (hildreo	130
WAtertown	State Zip Code TW 37184	218		
First Name 4	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name NUSON CO. 4	Donatio	3 ^ 3	12000	
Address		DUNATIO		
City /	State Zip Code			
Lebanon	IN 37087			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name				1
A Plus Printin	G	Printing		221 99
Address 133 Public Sq		17110 FIN	9	331,44
Lebanon "	State Zip Code 3708			
First Name	Middle Name	Purpose of Expenditure	F	Amount of Expenditure
Ast Name Business Name HAbitattop Itum	ranity	Donatio.	۸)	200 00
606 EMAIN	St.	4		
* Lebanon	State Zip Code 37087			
5. 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	of this form are used.)			
, and amount must	os shown in rem 150. Or suffilliary.)			



ITEMIZED STATEMENT OF EXPENDITURES FLOWNDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVE	PING THE DEDIOD
				FROM: 9-1-19	TO: 6-30-14
					Amount
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT					
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITEN	MIZED EXPENDITURE (expenditures totaling more than \$100	to any payee during the pe	riod)
First Name	Middle N	ame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name O. S. POST OF FIG		1			
U.S. POST OFFIC	ce		PostAg		426 -
Address GAY St.			Posting		40-6
City Lebanon	State	Zip Code 37087			
First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name 105 Prin	five	-	Sign ST	a Lac	000
A didensity	Sq.		01900	144.63	117.00
city Lebanon	State TN	Zip Code 37087			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name Middle Name			Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
Address					
Sity	State	Zip Code			
irst Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
ddress					ļ
ity	State	Zip Code			
irst Name	е	Purpose of Expenditure		Amount of Expenditure	
est Name/Business Name	*				
ddress					
ty	State	Zip Code			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages	of this form -	ro used)			2037,94
(If this is the last page of expenditures, this amount must					0,50 11 11



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

				FROM:	VERING THE PERIOD TO:
3. TOTAL ITEMIZED IN-KIND CO	ONTRIBUTIO	NS FROM PRECEDING PA	AGE (enter \$0 if first itemized page	e)	Amount
4. COMPLETE THE APPROPRIATE					contributor during the period)
First Name	Middle Name		In-Kind Contribution Receive	d For:	Value of In-Kind Contribu
Last Name/Organization Name	1 1	Λ	Primary Election Runoff (Local Election	General Election	/
Address	λ //	A	Date of In-Kind Contribution	is only)	Aggregate this Election
City	101	State Zip Code	Description of In-Kind Contribution		/
Occupation	Employer	•			
First Name		Middle Name	In-Kind Contribution Received		Value of In-Kind Contribut
ast Name/Organization Name			Primary Election Runoff (Local Election	General Election	
Address	N	one	Date of In-Kind Contribution	y only)	Aggregate this Election
Dity	1	State Zip Code	Description of In-Kind Contribution		
Occupation	Employer	•	7 /		
irst Name		MiddleName	In-Kind Contribution Received		Value of In-Kind Contribut
ast Name/Organization Name			☐ Primary Election ☐ Runoff (Local Elections	General Election	
ddress	No	ve \	Date of In-Kind Contribution	o Olly)	Aggregate this Election
ity		State Zip Code	Description of In-Kind Contribution		
ccupation	Employer				
rst Name	Ī	Middle Name	In-Kind Contribution Received		Value of In-Kind Contribution
st Name/Organization Name			☐ Primary Election ☐ Runoff (Local Elections	General Election	
dress	No	ne 1	Date of In-Kind Contribution	(0.11)	Aggregate this Election
у		tate Zip Code	Description of In-Kind Contribution		
cupation	Employer				
Name	M	ddle Name	In-Kind Contribution Received		Value of In-Kind Contribution
Name/Organization Name	NIO	net	Primary Election	General Election Only)	
ress	100		Date of In-Kind Contribution		Aggregate this Election
	St	ate Zip Code	Description of In-Kind Contribution		<u> </u>
ipation	Employer	1	1		
TOTAL ITEMIZED IN-KIND CON					
(Carry forward to item 3. of next page if add (If this is the last page of in-kind contribution	itional pages of the ns, this amount m	is form are used.) ust be shown in item 22b. of summ	nary.)		



ITEMIZED STATEMENT OF LOANS - CANDIDATE

Complete the Following for the Source of the Loan First Name Complete the Following for the Source of the Loan	1. NAME OF CANDIDATE OR CO	MANITTEE								
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (leans beliefung note than \$100 ham any source during they principle.) Combiget the Following for the Source of the Loans First Name (Regining of Privide) Middle Name (Regining of Privide) Deter of Loan Address Loan Received For: Primary Baston Pr	1. NAME OF CANDIDATE OR CO	MMITTEE					2. FR	REPORT		
Complete the Following for the Source of the Loan First Name Mode Name Data Name/Organization Name Mode Name Mode Name Data Name/Organization Name Mode Name Mode Name Data Name/Organization Name Mode Name Data Name/Organization Name Mode Name Data Name/Organization Name Mode Name Data Name/Organization Name Data Nam										10.
First Name Collected ring Constituting Const	3. COMPLETE THE APPROPRIAT	E ITEMS FOR EAC	H ITEMIZ	ED LOAN	(loans totaling n	nore than \$100	from any source	during the	period)	
Last Name/Organization Name Sepanding of Persod Riscolved From Private Riscolved From Riscolved From Private Riscolved From Riscolved Fr	Complete the Following for the Source	of the Loan						1	9	
Loss Receive For: Primary Election General Electory Date of Loss Primary Election General Electory Date of Loss Primary Election General Electory Date of Loss Receive Ear: Primary Election General Electory Date of Loss Date of Loss	First Name	Middle Name				2000				
Address Lean Received For: Primary Election General Electrical Primary Electron General Electron City State Zip Code Responsibility Respons	Last Name/Organization Name			(Deginini)	gorrenou)	Received	Pay	ments	1 (1	end of Period)
City State Zip Code Primary Election General Elections City)								/		
State Zip Code Runoff (Local Electors Crity)	Address			Loan Recei	ved For:			Date of Lo	oan	
Runoff (Local Elections Coly)	City	State Zip Code		☐ Prima	ry Election	☐ General E	Election			
First Name Last Name/Organization Name Last Name/Organization Name Last Name/Organization Name Address City State Zip Code City State Zip Code City Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name First Name Middle Name Address	VM			Runof	f (Local Elections (Only)				
Lest Name/Organization Name Lest Name/Organization Name Address Address Address Address Address City State Zip Code City State Zip Code Amount Guaranteed Outstanding First Name Middle Name Lest Name/Organization Name Address Address Address City State Zip Code City State Zip Code City State Zip Code City State Zip Code Amount Guaranteed Outstanding Address Addre)]	et All Endorsers or Gu	arantors fo	r Above Lo	an (If more spac	ce is needed	please attach	a page)		
Address City State Zip Code City State Zip Code Amount Guaranteed Outstanding First Name Middle Name First Name Middle Name Last Name/Organization Name Address City State Zip Code City State Zip Code Andress Address Address Address Address City State Zip Code Amount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name First Name Middle Name First Name Middle Name Address City State Zip Code City State Zip Code City State Zip Code Andress City State Zip Code City State Zip Code City State Zip Code Andress City State Zip Code Andress City State Zip Code City State Zip Code Andress City State Zip Code City State Zip Code Outstanding Andress City State Zip Code Outstanding City State Zip Code City State Zip Code Outstanding City State Zip Code City State Zip Code Outstanding City State Zip Code City State Zip Code Outstanding Loan Balance City Code City State Zip Code Outstanding Loan Balance City Code City State Zip Code Outstanding Loan Balance City Code City State Zip Code Outstanding Loan Balance City Code City Code City State Zip Code City State Zip Code Outstanding Loan Balance City Code City Code City State Zip Code City State Zip Code Outstanding Loan Balance City Code City Cod	First Name	Middle Na	me		First Name	1/	1		Middle Na	ime
City State Zip Code Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name Lish Name/Organization Name Address City State Zip Code City State Zip Code City State Zip Code City State Zip Code Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name Last Name/Organization Name Middle Name Last Name/Organization Name Address Ad	Last Name/Organization Name				Last Name/Org	anization Name)			
City State Zip Code Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name Lish Name/Organization Name Address City State Zip Code City State Zip Code City State Zip Code City State Zip Code Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name Last Name/Organization Name Middle Name Last Name/Organization Name Address Ad	Add				1 1	/				
Amount Guaranteed Outstanding Address City State Zip Code Amount Guaranteed Outstanding Annount Guaranteed Outstanding Address State Zip Code City State Zip Code Annount Guaranteed Outstanding Address State Zip Code City State Zip Code Annount Guaranteed Outstanding Annount Guaranteed Outstanding State Zip Code City State Zip Code Annount Guaranteed Outstanding Annount Guaranteed Outstanding State Zip Code City State Zip Code Annount Guaranteed Outstanding Code Annount Guaranteed Outstanding Code Annount Guaranteed Outstanding Code City State Zip Code City State Zip Code City State Zip Code Annount Guaranteed Outstanding Outstanding Code Annount Guaranteed Outstanding Code City State Zip Code Annount Guaranteed Outstanding Code City State Zip Code City City State Zip Code City	Address		\		Address	/				
First Name Middle Name First Name Middle Name Lash Name/Organization Name Address Address Address Address Address Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name First Name Middle Name Last Name/Organization Name Address Amount Guaranteed Outstanding First Name Middle Name Last Name/Organization Name Last Name/Organization Name Amount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Address Address Address Address Outstanding Cotals for all Loans (complete on last page of /fernized loans) otal loans received should also be shown in letting 16, of summary page.) Outstanding of Period) Geginning of Period) Received Payments End of Period)	City	State	Zip Coo	de	City				State	Zip Code
First Name Middle Name First Name Middle Name Lash Name/Organization Name Address Address Address Address Address Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name First Name Middle Name Last Name/Organization Name Address Amount Guaranteed Outstanding First Name Middle Name Last Name/Organization Name Last Name/Organization Name Amount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Address Address Address Address Outstanding Cotals for all Loans (complete on last page of /fernized loans) otal loans received should also be shown in letting 16, of summary page.) Outstanding of Period) Geginning of Period) Received Payments End of Period)	Amount Guaranteed Outstanding		1		Amount Guaran	tood Outstandi	ng			
List Name/Organization Name Address City State Zip Code City State Zip Code City Amount Guaranteed Outstanding First Name Middle Name Entst Name/Organization Name Address City State Zip Code Amount Guaranteed Outstanding First Name Middle Name Entst Name/Organization Name Address City State Zip Code Outstanding City State Zip Code City State Z	,				Tinount pouran	teed Outstandin	19			
Address City State Zip Code City State Zip Code City Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name St Name/Organization Name Last Name/Organization Name Address Address Address Amount Guaranteed Outstanding First Name Middle Name Last Name/Organization Name Amount Guaranteed Outstanding First Name St Name St Name St Name St Name Address Address Address Address Address Address Outstanding First Name Address Outstanding Loan Balance (End of Period) Received Payments Outstanding Loan Payments Outstanding	First Name	Middle Na	me	/	First Name				Middle Na	me
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City State Zip Code mount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name First Name Middle Name Last Name/Organization Name City State Zip Code Amount Guaranteed Outstanding Amount Guaranteed Outstanding First Name Middle Name First Name Middle Name Sit Name Middle Name Sit Name Sit Name Middle Name Last Name/Organization Name Clast Name/Organization Name Uses Name/Organization Name Clast Name/Organization Name Uses Name/Organization Name Uses Name/Organization Name Clast Name/Organization Name Uses N	Last Namer Organization Name	1/1) //		Last Name/Orga	inization Name				
mount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding Address Address Address Address Address Amount Guaranteed Outstanding First Name City State Zip Code Amount Guaranteed Outstanding First Name Middle Name First Name Middle Name First Name Middle Name First Name Middle Name Address Address Address Address Address Outstanding Amount Guaranteed Outstanding Outstanding Loan Balance (Beginning of Period) Received Payments Outstanding Loan Balance (End of Period)	Address	(4			Address					
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First Name Middle Name First Name Last Name/Organization Name Last Name/Organization Name Address Address Address Address Amount Guaranteed Outstanding First Name Middle Name First Name Middle Name First Name Middle Name First Name Address Address Address City State Zip Code City State Zip Code City State Zip Code Outstanding Outstanding Outstanding Outstanding Outstanding Outstanding Outstanding Outstanding Outstanding Outstanding Loan Balance (Beginning of Period) Received Payments (End of Period)	Amount Guarantand Quitatanding									
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Address Address Address Address Address Amount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding Amount Guaranteed Outstanding Middle Name First Name Last Name/Organization Name Address Address Address Address Address Outstanding Amount Guaranteed Outstanding Outstanding Outstanding Outstanding Loan Balance (Beginning of Period) Totals for all Loans (complete on last page of ifemized loans) Total loans received should also be shown in item 16. on summary page.) Outstanding Loan Balance (Beginning of Period) Received Payments Can Outstanding Loan Balance (End of Period)	First Name	Middle Nan	ne		First Name		1		Middle Na	me
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rst Name	mount Guaranteed Outstanding		1		Amount Course					
St Name/Organization Name Last Name/Organization Name Last Name/Organization Name Address Address City State Zip Code Outstanding Cotals for all Loans (complete on last page of itemized loans) 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 loan payments should also be shown in item 20, on summary page.)	mount outstances outstanding				Amount Guarante	ed Outstanding	9		10	
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Address Address Address City State Zip Code Outstanding Cotals for all Loans (complete on last page of itemized loans) 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 loan payments should also be shown in item 20, on summary page.)	act Name/Organization Name	M			Last Name (O-	N			1	
ty State Zip Code City State Zip Code Ount Guaranteed Outstanding Fotals for all Loans (complete on last page of itemized loans) Totals for all Loans (complete on last page of itemized loans) Outstanding Loan Balance Loans Loan Outstanding Loan Balance (Beginning of Period) Received Payments (End of Period)	Constitution reality	M			Last Name/Orgal	iization Name				
ount Guaranteed Outstanding Amount Guaranteed Outstanding Totals for all Loans (complete on last page of itemized loans) otal loans received should also be shown in item 16, on summary page.) otal loan payments should also be shown in item 20, on summary page.) otal loan payments should also be shown in item 20, on summary page.)	Address	1 /			Address					\
ount Guaranteed Outstanding Amount Guaranteed Outstanding Totals for all Loans (complete on last page of femized loans) fotal loans received should also be shown in item 16, on summary page.) fotal loan payments should also be shown in item 20, on summary page.)	City	State /	Zip Code		City				State	7in Code
Totals for all Loans (complete on last page of itemized loans) Outstanding Loan Balance (Beginning of Period) Dutstanding Loan Balance (Beginning of Period) Outstanding Loan Balance (End of Period)	nount Guaranteed Outstanding	/				and Outstandi-	,		- Cidio	Tib cone
otal loans received should also be shown in item 16. on summary page.) (End of Period) (End of Period) (End of Period)					Amount Guarante	eu Outstanding				
otal loan payments should also be shown in item 20, on summary page.)	Totals for all Loans (complete on last	page of itemized loa	ans)							
	Total loan payments should also be shown in ite	m 20, on summary page.)	ŀ	(beginning of I	-erioo)	Received	Payme	ents	(End of Period)



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

					/					
1. NAME OF CANDIDA	1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD				
				FROM:	/ TO:					
OBLIGATION (obliga	PPROPRIATE ITEMS attoms totaling more the end of the reporting	FOR EACH ITEMIZED an \$100 owed to any period)	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)				
First Name		Middle Name								
Last Name/Business Name										
Address	,									
City	NIA	State Zip Code								
Description of Obligation	11//	\		<u> </u>	<u> </u>	1				
First Name		Middle Name								
Last Name/Business Name		1	- /							
Address	ALM									
City	1011	State Zip Code	- //							
Description of Obligation										
First Name		Middle Name								
Last Name/Business Name	WII.	W 100								
Address	11/4		$A \setminus A$							
City	1	State Zip Code	$H \setminus H$							
Description of Obligation										
First Name		Middle Name								
ast Name/Business Name	1/1		\dashv							
ddress	11/1/		-							
Dity		State Zip Code								
escription of Obligation										
Irst Name		Middle Name		//						
st Name/Business Name	1/1/									
Idress		_/		1						
ity	1.	State Zip Code	_							
escription of Obligation		/								
				Die Cond. Salah de T						
TOTALS Total from Outstanding Bala in item 23b. on summary	nce - (End of Period) co	olumn must also be shown								
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