## CAMPAIGN FINANCIAL DISCLOSURE STATEM

For State and Local Candidates For Single-Candidate Committee

Fc	For State and Lo or Single-Candid	cal Candidates late Committees	JUL 15 2019 4.
I DATE OF REPORT	2.a. NAME OF CANDID	ATEOR COMMITTEE	WILSON COUNTY
7-15-2019	Rando	ull Hutta	ELECTION COMMISSION
2.b. IF COMMITTEE, NAME OF CANDIDATE			CTION DATE
4.a. CAMPAIGN ADDRESS AND PHONE			2018
Street or Dural David	City	0	
2502 Kinderhill W	an Lehann	State Zip Coo	
4.b. CANDIDATE'S HOME ADDRESS (if differe Street or Rural Route	nt than 4.a.)	1 JN 370°	70 615-405-1611
Officer of Aural Route	City	State Zip Cod	e Phone
5. OFFICE SOUGHT (include district number,	if applicable)		
Wilson County N	1 applicable) 6. I	NAME OF POLITICAL TREASUR	ER (may be candidate)
7. CATEGORY OR REPORT (Check one)	agoi	Lou Ann L	utto
FIRST SECOND THIRD	FOURTH PRE		<b>D</b>
QUARTER QUARTER QUARTER  8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER PRIMA	RY GENERAL SUBB	D-YEAR YEAR-END LEMENTAL SUPPLEMENTAL
<u> </u>	8.b. E	NDING DATE OF REPORTING PER	<u>LEMENTAL SUPPLEMENTAL</u> RIOD
9. (Check one)		6-30-19	
a. This campaign is exempt from the state of			
a. This campaign is exempt from detailed tures total \$1,000 or less for this report	d disclosure because contrib rting period. (Complete item	outions (including in-kind) received	d total \$1,000 or less AND expendi-
b. This campaign is required to file a det	ailed financial disales.	, and tally	
<ul> <li>b.  This campaign is required to file a detain and/or expenditures total more than \$</li> </ul>	1,000 for this reporting perior	ause contributions (including in-ƙ d.	ind) received total more than \$1,000
10. I/we do solemnly swear or affirm that the inf accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we s benefit the candidate or for any other none signature of candidate	er er	The state of the carrollage	ended for the personal financial de.
11. WITNESS SIGNATURE			
Strang Parriable signature of witness	7/15/19 date	Sara Dayle signature of witness	xxxx 7-15-19 date
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		<u>\$22,3</u>	6.56
b. TOTAL RECEIPTS THIS PERIOD		<u> </u>	_
c. TOTAL DISBURSEMENTS THIS PERIOD			0.00
d. BALANCE ON HAND (12.a. plus 12.b. minu			s 20,276.56
e. TOTAL LOANS OUTSTANDING			
			\$\$
f. TOTAL OBLIGATIONS OUTSTANDING			-0-
		***************************************	\$



## SUMMARY PAGE - CANDIDATE JUL 15 2019

13. NAME OF CANDIDATE OR COMMITTEE (In Full)  Randall Hutto	14. REPORT COVI	RING THE RERI			
RECEIPTS	FROM: 1/16/19	10:6/30/10			
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)	\$	<del>.</del>			
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		-\$ <u> </u>			
10. LOANS RECEIVED THIS REPORTING PERIOD	10. LOANS RECEIVED THIS REPORTING PERIOD				
17. INTEREST RECEIVED THIS REPORTING PERIOD	** INTEREST RECEIVED THIS REPORTING PERIOD				
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	16. 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 -					
Sponorships \$ 420.	e.g., printing, postage, ga	asoline)			
Advortis	<del></del>				
Donation &	···				
\$ 160.	<u>DD</u>				
\$					
\$	<del></del>				
\$	- Marine				
\$					
\$					
\$		•			
Total of Expenditures (\$100 or less each payee)	- TAN N				
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 790.00				
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$_1250:00	2-115			
20. LOAN REPAYMENTS MADE THIS PERIOD	\$	2040.00			
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$	-b-			
22. IN-KIND CONTRIBUTIONS		2040.00			
a. Unitemized in-kind contributions (\$100 or less from each source this period) b. Itemized in-kind contributions (over \$100 from each each source)					
b. Itemized in-kind contributions (over \$100 from each source this period)	\$				
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$	N-			
3. OBLIGATIONS	<u> </u>	-0-			
Unitemized Obligations Outstanding (\$100 or less each)					
D. Itemized Obligations Outstanding (Over \$100 each)	5				
TOTAL OBLIGATIONS OUTSTANDING (644 22 - 10					
TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12	2.f.)\$	-0-			

JUL 15 2019

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE  2. REPORT COVER. FROM: VILLIA						
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					TO: 6/30/19 Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITE	MIZED EXPENDITURE	expenditures totaling more than \$100 to	e) any pavee during the ne	riod)	
First Name	Middle N	20100 AV	Purpose of Expenditure	o diri) payoc during the pe	Amount of Expenditure	
Last Name Business Name Main Street Media	oF	Tennessee	Lebanon +	Mt.Juliet		
P.D. BOX 8156			Chamber M	nagazine	#800.00	
Ballatin	State	Zip Code 37066	Ad			
First Name	Middle N	erate de la participat de la como entre en al como de la como de l La como de la como de la como entre en al como de la co	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name  LON BOOKS From	wilson Books From Birth		Table Sponsor			
Adjuga Public Square		Table Sponsor Imagination Dinner		\$ 250.00		
Lebanon	State	Zip Code 3 7087			7	
First Name	Middle Na	AND THE RESERVE OF THE PARTY OF	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name Blue Devil Football Foundation Addrags D. Ann.		Hole Sponsor		# 200.0b		
Addragas D. Box 353 City Lebanon	State	Zip Code <b>37088</b>				
First Name	Middle Nam		Purpose of Expenditure	,	Amount of Expenditure	
ast Name/Business Name					,	
Address						
ity	State	Zip Code				
irst Name	Middle Nam	9	Purpose of Expenditure	A	mount of Expenditure	
ast Name/Business Name				,		
ddress						
ly	State	Zip Code				
rst Name	liddle Name		Purpose of Expenditure	Aı	mount of Expenditure	
st Name/Business Name	···					
dress						
y	tate	Zip Code				
. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of (If this is the last page of expenditures, this amount must be	ihis form are shown in ite	used.) m 19b. of summary.)			12:50.00	