RS

## CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Comm

ELECTION COMMISSION

		i only ie-car	ididate (	-ommitte	<del>2</del>	
1. DATE OF R	EPORT	2.a. NAME OF C	ANDIDATE OR	COMMITTEE		
10-	7-2014	Sin	1 Hora	adsho		
2.b. IF COMMI	TTEE, NAME OF CANDIDATE				3. ELECTION DAT	E
					11-4-	2214
	ADDRESS AND PHONE					DIT.
Street or Ru	aral Route	City	13 2	State	Zip Code	Phone
13051	Solling Meadai C	I Mt. 50	eliet	Tal	37122	615-758-744
4.b. CANDIDAT Street or Ru	E'S HOME ADDRESS (if differe					
Shock of the	nai Noute	City		State	Zip Code	Phone
5. OFFICE SC	DUGHT (include district number,	if and the bloom				
011 - 1	" 1 A 1 A 1 A 1	DISTANT	6. NAME	OF POLITICAL	TREASURER (may b	e candidate)
7. CATEGORY	et City Commissi	lones 4	DIV	n Brac	15 haw	
7. CATEGORY	OR REPORT (Check one)					
FIRST	SECOND THIRD	FOURTH	PRE-	PRE-	LJ MID-YEAR	LJ YEAR-END
QUARTER 8.a. BEGINNING	QUARTER QUARTER DATE OF REPORTING PERIOD	QUARTER	PRIMARY	GENERAL	SUPPLEMENTAL PRTING PERIOD	SUPPLEMENTAL
7-1-7	011/11. 924	7	O.D. ENDING	-	1	
9. (Check one)	117 thru 7-30	2014	7-1	30-20	14	
					,	
a.   This tures	campaign is exempt from detaile total \$1,000 or less for this repo	ed disclosure because	e contributions	(including in-ki	nd) received total \$1,0	000 or less AND expendi-
/				-		
b. This	campaign is required to file a de or expenditures total more than s	tailed financial disclo	sure because	contributions (in	ncluding in-kind) receiv	ved total more than \$1,000
andre		51,000 for this reporti	ng period.			
Financial Di	emnly swear or affirm that the in counting of campaign contribution isclosure Act. Additionally, I/we be candidate or for any other nor	ons and expenditures swear or affirm that r	required to be	reported by the	e candidate committee	hu the Comment.
Gim b	e of candidate	10-7-2014 date	<u>(</u>	Jim 6	nadsha f political treasurer	10-7-2014 date
11. WITNESS SI	GNATURE					
signatur	re of witness	10/5/11/4		Signati	ure of witness	ate tolaly
12. SUMMARY						
a. BALANC	E ON HAND LAST DEPORT				A	
a. BALANC	E ON HAND LAST REPORT				\$	
b. TOTALRE	ECEIPTS THIS PERIOD				\$ <u>178.41</u>	
c. TOTALDI	SBURSEMENTS THIS PERIOD				\$ 28.4/	
d. BALANC	E ON HAND (12.a. plus 12.b. m	inus 12.c.)			\$	150.00
e. TOTALLO	DANS OUTSTANDING					28 41
200.00 (200.00 (200.00 (200.00 (200.00 (200.00 (200.00 (200.00 (200.00 (200.00 (200.00 (200.00 (200.00 (200.00					\$	IN WOOD
f. TOTAL OF	BLIGATIONS OUTSTANDING				\$	0

## SUMMARY PAGE - CANDIDATE OCT 1 0 2014

pm. RS

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	WIL	SON COUNTY
The Street Sommer Let (III rull)	14. REPORT COV	
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	FROM: 7-1-2014	TO: 9.30-201
a. Unitemized Contributions (\$100 or less from each source this period)	* 4	
b. Itemized Contributions (over \$100 from each source this period)	\$ 150 M	_
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	4.30,00	- 150 NC
16. LOANS RECEIVED THIS REPORTING PERIOD		- 29 4
17. INTEREST RECEIVED THIS REPORTING PERIOD		\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		. 179 4
DISBURSEMENTS		.\$ 110,11
19. EXPENDITURES (other than loan payments)		
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g	n nrinting postage c	randina)
\$		<sub>l</sub> asoline)
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$\$	-	
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.)	\$	28.41
20. LOAN REPAYMENTS MADE THIS PERIOD	\$	0
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$	28.41
22.IN-KIND CONTRIBUTIONS		
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$	A THINK SHOW A STATE OF THE STA	
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.)	\$	0
23. OBLIGATIONS		
a. Unitemized Obligations Outstanding (\$100 or less each)\$	0	
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.)\$	0

12:55 p.~

OCT 10 2014

## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATEON

1. NAME OF CANDIDATE OR COMMITTEE	,			2. REPORT COV	ERING THE PERIOD
- Sim Brade	shau	1		FROM:7-1-201	4 TO: 9-30-2014
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU	JTIONS F	ROM PRECEDING P.	AGE (enter \$0 if first itemized p	lane)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITE	MIZED CONTRIBUTION	(contributions totaling more than	\$100 from any contribut	tor)
James	Middle N	ame	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Robertson		11	Primary Election	General Election	150 00
Address 403 George CT	-		Runoff (Local Election	ns Only)	150.00
City MT. Juliet	State	Zip Code   3 7/22	Date of Contribution		Aggregate This Election
Occupation			9-24.	73111	15000
Employer			1 7 2 7 1	2017	150.00
First Name	Middle Na	ame	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	1		Primary Election	General Election	
Address			Runoff (Local Elections	s Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation			†		
Employer					
First Name	Middle Nam	ne	Contribution Received For:		Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address			Runoff (Local Elections	Only	
City				Only)	
	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
mployer			ia la		
irst Name	Middle Name		Contribution Received For:		Amount of Contribution
ast Name/Organization Name			Primary Election	General Election	
ddress			Runoff (Local Elections	Only)	
ty	State	Zip Code	Date of Contribution		Aggregate This Election
ccupation					
nployer					
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of t() if this is the last page of contributions, this amount must be	his form are	used.)			

ITELLIVE	D 07						00	<b>T 1 0</b> 2014	p.r- P.r- RS
5im Brad	shau	5			7	REPORT FROM: 7-1-20	COVERIN	ON COUNTY ON COMMISSION OF THE PERIOD TO: 9-30-2014	N
COMPLETE THE APPROPRIATE ITEMS     Complete the Following for the Source of the Loar		ITEMIZED LOA	N (loans totaling	more than \$	100 from any sou	rce during the p	eriod)		1
First Name . Middle Name . Outstanding (Beginning Last Name/Organization Name			ing Loan Balance ing of Period)	Loai Rece 28	1	Loan Payments	(E	nding Loan Balance End of Period)	
Address 1305 Rolling Meador City State Tu	Zip Code 37/3	Prir	ceived For: mary Election noff (Local Elections	s Only)	ral Election			-7014	
First Name	Middle Nami	antors for Above L	oan (If more spa	ace is need	led please atta	ch a page)	Middle Na	me	
Last Name/Organization Name	1	~	Last Name/Or	rganization N	ame				
Address		·	Address	3 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3					
City	State	Zip Code	City	äty			State	Zip Code	
Amount Guaranteed Outstanding			Amount Guara	Amount Guaranteed Outstanding					
First Name	First Name Middle Name			First Name Middle Name					
Last Name/Organization Name			Last Name/Or	Last Name/Organization Name					
Address			Address	Address					
City	State	Zip Code	City		****		State	Zip Code	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name	Middle Name		First Name Middle Name					me	
Last Name/Organization Name	ı		Last Name/Org	Last Name/Organization Name					
Address			Address						
City State Zip Code		City State Zip Code					Zip Code		
Amount Guaranteed Outstanding			Amount Guaranteed Outstanding						
irst Name Middle Name			First Name Middle Name						
ast Name/Organization Name			Last Name/Organization Name						
			Address						
City	State	Zip Code	City State Zip				Zip Code		
mount 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.)			Outstanding Loa (Beginning of		Loans Received	Loan Paymer		standing Loan Balance (End of Period)	