# CAMPAIGN FINANCIAL DISCLOSURE STATEMENTOUNTY STATEMENT OUNTY S

1. DATE OF REPORT 2 a NAME OF C	
July 31, 2014 2.a. NAMEOFO	WOOD C. BARRY
2.b. NAME OF CANDIDATE'S COMMITTEE	3. ELECTION DATE
COMMITTEE TO ELECT HAYWOOD BARRY	( Judge 8/1/2014
4.a. CAMPAIGN ADDRESS AND PHONE	
Street or Rural Route City	State Zip Code Phone
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)	To 37087 615 444-6371
Street or Rural Route City	State Zip Code Phone
103 OAK HILL CIRCLE LEBATION	Tel 37087 6154446371
5. JUDICIAL OFFICE SOUGHT (include district number, if applical	
7. CATEGORY OR REPORT (Check one)	2 Julie GATLIN
CATEGORY OR REPORT (Check one)	
FIRST SECOND THIRD FOURTH	PRE- PRE- MID-YEAR YEAR-END
QUARTER QUARTER QUARTER  8.a. BEGINNING DATE OF REPORTING PERIOD	PRIMARY GENERAL SUPPLEMENTAL SUPPLEMENTAL
July 1, 2014	8.b. ENDING DATE OF REPORTING PERIOD
9. (Check one)	July 28, 2014
	,
<ul> <li>This campaign is exempt from detailed disclosures becauexpenditures total \$1,000 or less for this reporting period</li> </ul>	use contributions (including in-kind) received total \$1,000 or less AND . (Complete items 12d., 12e. and 12f.)
b. 🕅 This campaign is required to file a detailed financial discl	osure because contributions (including in-kind) received total more than \$1,000
and/or expenditures total more than \$1,000 for this report	ting period.
10. SIGNATURE OF CANDIDATE	11. SIGNATURE OF POLITICAL TREASURER
Harvord Barey 7/31/14	I do solemnly swear or affirm that the information contained in thiscampaign financial disclosure report is true and accurate. Additionally, I swear or
Signatue of Candidate Date	affirm that no campaign contributions have been expended for the personal
	financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.
$\mathcal{Y}$	dominated by the rederal internal revenue code.
16ma Janbary 7-31-14	x My Jathi B 1311
Signatue of Witness Date	Signature of Political Treasurer Date
•	$\mathcal{A}\Lambda$ () $\Lambda$
	1/ Wrong & Man Darpos 7-31-14
	Signatue of Witness Date
	V
2. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ 17/1, c9
TOTAL RECEIPTS THIS PERIOD	\$ 2000,00
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 2333, 32
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	s <u>1378. 37</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ 6000.00 \$ 205.81
	3



### JUL 31 2014 ":45

#### SUMMARY PAGE - CANDIDATE

WILSUN COUNTY

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
RECEIPTS BLEST HAYDOOD BARRY Judge	FROM: 7/1/14 TO: 7/28/14
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.)	\$O
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ 2000 00
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 2000 9
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, gasoline)
<b></b> \$	
\$	
<b></b> \$	
\$	
<b></b> \$	
\$	
<b></b> \$	
<b></b> \$	
Total of Expenditures (\$100 or less each payee) ALL THEMIZED  b. Itemized Expenditures (Over \$100 each payee this period) SEC TIEM,	s 2333,3Z
b. Itemized Expenditures (Over \$100 each payee this period) SE ITEM	IS ON PAGES 5 & 6
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 2333.32
20. LOAN REPAYMENTS MADE THIS PERIOD	\$
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 2333.32
22.IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	.\$
b. Itemized in-kind contributions (over \$100 from each source this period)	45
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>O</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ 23.26
b. Itemized Obligations Outstanding (Over \$100 each)	\$ 182.59
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	12.f.) \$ 205, 85





JUL 31 2014 ~ 11:45

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE MMISSION

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO ECEC	RING THE PERIOD				
COMPLETE TO ECEC,	TO: 7/23/14				
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	0				
4. COMPLETE THE APPROPRIATE ITEMS FOR E	-)				
First Name	Middle Na	me	Contribution Received For:		Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address			Runoff (Local Election	s Only)	
City	State	Z/p Code	Date of Contribution	Aggregate This Election	
Occupation	38		1		
Employer					
First Name	Middle Na	me	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	<u> </u>		Primary Election	General Election	
Address			Runoff (Local Election	s Only)	
City	State	Zip Code	Date of Contribution	Aggregate This Election	
Occupation					
Employer					
First Name	ne	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name	/	Primary Election	General Election		
Address			Runoff (Local Election:	s Only)	
City	State Zip Code				Aggregate This Election
Occupation					
Employer					
First Name	Middle Nam	e	Contribution Received For:		Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address			Runoff (Local Elections	s Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
mployer					
<ol> <li>TOTAL ITEMIZED CONTRIBUTIONS         (Carry forward to item 3. of next page if additional pages of (If this is the last page of contributions, this amount must b     </li> </ol>					0





## ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS -GANDIDATED

1. NAME OF CANDIDAT	E OR COMMITTEE	9 44	AVWDOD A	BARRY Judge FROM: 7/1/	ERING THE PERIOD
				E (enter \$0 if first itemized page)	Amount
				BUTION (in-kind contributions totaling more than \$100 from any	contributor during the period)
First Name Middle Name			ne	In-Kind Contribution Received For:	Value of In-Kind Contributi
Last Name/Organization Name	100 100 100 100 100 100 100 100 100 100	-		☐ Primary Election ☐ General Election☐ Runoff (Local Elections Only)	
Address			/_	Date of In-Kind Contribution	Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution	
Occupation	Employer				
First Name		Middle Nam	ne	In-Kind Contribution Received For:   □ Primary Election □ General Election	Value of In-Kind Contribut
Last Name/Organization Name		***************************************		Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution	
Occupation	Employer			1	
First Name		Middle Nam	e	In-Kind Contribution Received For:	Value of In-Kind Contribut
ast Name/Organization Name		-		Primary Election General Election  Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution	
Occupation	Employer		/	-/	
First Name		Middle Name	- /	In-Kind Contribution Received For:	Value of In-Kind Contributi
ast Name/Organization Name				Primary Election General Election	
Address			-/-	Date of In-Kind Contribution	Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution	
Occupation	Employer				
rst Name		Middle Name		In-Kind Contribution Received For:	Value of In-Kind Contribution
st Name/Organization Name				☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
dress			_	Date of In-Kind Contribution	Aggregate this Election
y		State	Zip Code	Description of In-Kind Contribution	
cupation	Employer				
TOTAL ITEMIZED IN-KI (Carry forward to item 3. of next	page if additional pages	of this form are			D
(If this is the last page of in-kind SS-1128 (Rev. 2/06)	contributions, this amour	n must be show	vii in item 22b. of summar	Page	RDA 1159



#### WILSUN COUNTY ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATESION

1. NAME OF CANDIDATE OR COMMITTEE  COMMITTEE TO FLE	RING THE PERIOD			
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	•	'	ge)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR	eriod)			
First Name	Middle Name	Amount of Expenditure		
Last Name/Business Name M+. JULIET CRONICLE		AD		23000
Address P.D. BOX 647				770-
City nt Juliet	State Zip Code 3-7/2Z	CK 1016		
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name LEGANOW DEMOCA	CAT, INC			-00
Address P.O. BOX 430		ADS		1135=
City LEBANCON	State Zip Code 37087	CR 1017	7/3/14	
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name GONCD ENTER PRISE!	5, INC	AD IN	10000	
Address P.O. Box 50417		WILGON 1	185=	
City NASHVILLE	State Zip Code 74 37205	CK/018 "		
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name WAptT/WCOR		RADIO A	175	C- 00
Address 10 TROUSDALE A	Ferty RD	א טיעהרן	10)	570=
LEBALION	State Zip Code TW 37087	CK/0/9	7/9/14	
irst Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name WANT IW COR		RADIO ATE ADS WITH		
510 TROUS DALE FOR	RY PK.	FRED BUFF	to N Silver	9600
LISB ALLOW	State Zip Code 31081	C4 1020	7/9/14	14
irst Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name CEDAR STOKE BAG	IK	INTREST	ON LOAN	1732
LEBANON 124	State Zip Code 3 10 8 7	INTREST CK 1021	7/10/14	11=
5. TOTAL ITEMIZED EXPENDITURES	7. 17.700	-1 10~	11011	
(Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must				2233.32



### WILSON COUNTY ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATION COMMISSION

					1			
1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO ELEC	TH.	AYWOD.	BARRY Judge	2. REPORT COVER	TO: 7/28/14			
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount 22.33.32							
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)								
First Name	Middle Nam	ne	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name HEAVEN'S VICW BAPTIST	CH	inech	.D. 2)		10000			
Address P. D. BOX 1614  City LEBANON State Zip Code 57087			AD		100-			
City LEBANON	State	Zip Code 57087	CK 1022	7/21/14				
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip/Code						
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zhp Code						
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
First Name	Middle Nam	e /	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
First Name	First Name Middle Name				Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
TOTAL ITEMIZED EXPENDITURES  (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount mus	2333.32							



### ITEMIZED STATEMENT OF LOANS - CANDIDATE WILSON COUNTY

Ε						2. 1	REPORT	COVE	RING	THE PERIOD
(ECT	MA	V WOO	D BARI	ey i	Type	FRO	JM.		TO	
FOR EACH	ITEMIZ	ED LOAN	(loans totaling r	nore than \$1	00 from any	source	during the pe	eriod)		1-9/
า								-		
(Beginning					und l			Out		ng Loan Balance of Period)
Last Name/Organization Name CEDAR STOWE BANK 400					0=0	(	0	6	00	000
Address P.O. Box 724 Loan Recei										
City LEBAKON State Zip Code Runoff (Local Elections Only)							APR DREI	VZI	11,	ZOIY
orsers or Gua	rantors fo	or Above Loa	n (If more spa	ice is need	ed please a	attach	a page)			. /
Middle Nan	ne		First Name					Middle	e Name	
			Last Name/Or	ganization Na	ame					
ARCLE.	=		Address							
State	Zip Co	de 87	City					State		Zip Code
//		0	Amount Guara	nteed Outsta	nding					
First Name Middle Name				First Name Middle Name						
Last Name/Organization Name				Last Name/Organization Name						
/			Address		***				***	
State	Zip Co	de	City					State		Zip Code
			Amount Guara	nteed Outsta	nding					
Middle Nam	е		First Name					Middle	e Name	
	1		Last Name/Org	anization Na	ime		***************************************			
100000000000000000000000000000000000000			Address							
State	Zip Coo	de	City					State		Zip Code
		/	Amount Guarar	iteed Outstar	nding					
Middle Name	9/		First Name					Middle	Name	
	/		Last Name/Org	anization Na	me					
-/			Address							
State	Zip Cod	le	City					State	Т	Zip Code
			Amount Guaran	teed Outstan	iding					
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.)				f Period)	Receiv	ved			(	anding Loan Balance End of Period)
	FOR EACH name  Zip Code 3 70 2 orsers or Gua Middle Nam  State  Middle Nam  State  Middle Nam  State  State	FOR EACH ITEMIZ  In ame    Zip Code   3-70-87     Orsers or Guarantors for   Middle Name      State   Zip Cod     Middle Name      State   Zip Cod     Middle Name      State   Zip Cod     Middle Name	FOR EACH ITEMIZED LOAN  To ame Outstanding (Beginning WK HOO)  Loan Receive Primary  State Zip Code  Middle Name  Middle Name  State Zip Code  Middle Name  State Zip Code	FOR EACH ITEMIZED LOAN (loans totaling in ame   Outstanding Loan Balance (Beginning of Period)      Aboo   Company   Code   City     Amount Guarant Guarant Middle Name   City     Amount Guarant Guar	First Name    Middle Name   City   Amount Guaranteed Outstar	COREACH ITEMIZED LOAN (loans totaling more than \$100 from any name	FROM EACH ITEMIZED LOAN (loans totaling more than \$100 from any source in arme	FROM: FOR EACH ITEMIZED LOAN (leans totaling more than \$100 from any source during the per gramme   Outstanding Loan Balance (Beginning of Period)   Pagments   Pagme	FROM:	FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)  ame  Outstanding Loan Balance (Beginning of Period)  Amount Guaranteed Outstanding  Middle Name  Date of Loan Received For: Primay Election Primay E



#### **ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE	(0 /	2244-4	/	2. REPORT COVERING THE PERIOD				
Compettee To Elect H	HYWOU	DO BARRY	Judge	FROM: 7/1/		28/14		
COMPLETE THE APPROPRIATE ITEMS F     OBLIGATION (obligations totaling more that     person/vendor at the end of the reporting p	n \$100 ow		Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)		
First Name	Middle Na	ame						
Last Name/Business Name ERS			29 20	143.39	n	12759		
Address 1418 WEST MAINS	rt		31.20	110.01		102.51		
City LEBAHOW	State	Zip Code 37087		3930				
Description of Obligation GASOLENCE	Pui	RCH ASEI	) on v	115A CARD	YETZ	SUE		
First Name	Middle Na	ime						
Last Name/Business Name OFFICE MAX				77 0/	0	22 2/2		
Address 415 5. CUMBER	LAN	D		23-24	0	23.26		
City LEBAHAN	State	Zip Code 31087						
Description of Obligation  OFFICE SUPPLE	418	on	UISA CA	RD				
First Name	Middle Na	me			$\wedge$			
Last Name/Business Name			•					
Address CAMBA	MA	40 ST						
City LEBRIEN	State	300000						
Description of Obligation	90	Den 1	SUSSA CER	200				
First Name	Middle Na	me						
Last Name/Business Name								
Address								
City	State	Zip Code		)				
Description of Obligation								
First Name	Middle Nar	me						
Last Name/Business Name	l							
Address								
City	State	Zip Code						
Description of Obligation	L	1						
4. TOTALS						-08		
(Total from Outstanding Balance - (End of Period) or in item 23b. on summary page.)	olumn mus	t also be shown	39.20	166.65	0	205 85		