RECEIVED

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT COUNTY

For State and Local Judicial Single - Candidate Committees COMMISSION

1. DATE OF REPORT	2.a. NAMEOFO	ANDIDATE / WOOD	C - 1	BARRY	
2.b. NAME OF CANDIDATE'S COMMITTEE	1 , , , ,	7000		3. ELECTION D	ATE
Committee TO ELECT HAYE	NOOP BARR	y Judge		8/7/	2014
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Phone
P.O. BOX 0900 L	EBANON		TW	37088	615-444-6311
4.b. CANDIDATE'S HOME ADDRESS (if differen Street or Rural Route	City	√	State Tn/	Zip Code	Phone (215-444-631)
5. JUDICIAL OFFICE SOUGHT (include district		ole) 6. NAN	E OF POLITI	CAL TREASURER	
GENERAL SESSIONS JU			Tulie	Gatlin	/
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERA	MID-YE L SUPPLEME	
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING			
July 29, 2014		SE+	7. 30	2014	
9. (Check one)					
 This campaign is exempt from detaile expenditures total \$1,000 or less for the 	d disclosures becau his reporting period	ise contributions (Complete item	(including in-k is 12d., 12e. a	ind) received total nd 12f.)	\$1,000 or less AND
b. This campaign is required to file a det and/or expenditures total more than \$	ailed financial disclo	osure because co	ontributions (in	cluding in-kind) red	ceived total more than \$1,000
10. SIGNATURE OF CANDIDATE		11. SIGNATURE	OF POLITICA	LTREASURER	The same of the sa
Haywood Barry Signatue of Gandidate	10/1/14	l do solem financial d affirm that	nly swear or af isclosure repo no campaign c	firm that the informa ort is true and accu contributions have b	ation contained in thiscampaign urate. Additionally, I swear or seen expended for the personal
Signature of Gardinate	Date			andidate or for any nternal revenue co	other nonpolitical purpose as de.
Signatue of Witness	_/0/1/14 Date	Signature	of Political Tre	easurer	10/1/14 Pate
U		Kin	1	1	, ,
	ō	Signatue	of Witness	n Barry	- 10/1/14 Date
12 CUMMADV					
12. SUMMARYa. BALANCE ON HAND LAST REPORT				1378.	37
b. TOTAL RECEIPTS THIS PERIOD				5700-	00
c. TOTAL DISBURSEMENTS THIS PERIOD)			7078	.37
d. BALANCE ON HAND (12.a. plus 12.b. mir	nus 12.c.)				\$0-
e. TOTAL LOANS OUTSTANDING					s <u>- 0 - </u>
f. TOTAL OBLIGATIONS OUTSTANDING					s <u>- 0 -</u>

WILSON COUNTY

OCT 6 - 2014

SUMMARY PAGE - CANDIDATE

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12 NAME OF CANDIDATE OF COMMITTEE (I. F. II)	
13. NAME OF CANDIDATE OR COMMITTEE (In Full) COMMITTEE TO SIECT HAY WOOD BARRY	14. REPORT COVERING THE PERIOD FROM: 7/29/14 TO: 9/20/14
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	1/2/10/190/19
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 200.00
b. Itemized Contributions (over \$100 from each source this period)	.\$ 5500,00
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.)	
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.	a printing postage gaseline)
ALL EXPICADILLES WERE	g., printing, postage, gasoline)
TIEMIZED \$	
\$	
\$/	
\$ <u>(</u>	
Total of Expenditures (\$100 or less each payee) £ ITEMS	\$
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 706-07 AB
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	1064.06
20. LOAN REPAYMENTS MADE THIS PERIOD	. /
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	
22.IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ -0-
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ -6-
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>-0-</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	s <u>-0-</u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$0-
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	12.f.) \$ <u>- 0 -</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			A	2. REPORT COVE	RING THE PERIOD
Committee To Ele	CTX	YAYUDOD,	BARRY Judge	FROM: 7/29/1-	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU	TIONS FRO	OM PRECEDING PAC	GE (enter \$0 if first itemized p	eage)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEMI	ZED CONTRIBUTION (contributions totaling more than S	\$100 from any contributo	r)
First Name	Middle Nam	nė	Contribution Received For:		Amount of Contribution
Last Name/Organization Name HAYWOOD BARD Address 103 OAR HILL CIRC	RY		Primary Election	General Election	5500 =
Address 103 OAR HILL CIRC	che		Runoff (Local Election	ns Only)	
City LEBRUDAL	State	Zip Code 31087	Date of Contribution	2014	Aggregate This Election
Occupation Judge Employer			PERSONAL CON	TRIBUTION	55/3 49
Employer WILSON CO. TENNE	2586	•	SEPT 20, PERCOURL CON TO CAMPAIGN CANDIDATE	E BY	
First Name	Middle Nam	ne /	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	1	-/-	Primary Election	General Election	
Address	s		Runoff (Local Election	ns Only)	
City	State	Zp Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
First Name	Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name	1		☐ Primary Election ☐	General Election	
Address			Runoff (Local Election		
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
First Name	Middle Name		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					
Employer				ø	
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 like the contributions).					5513 49



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

[
1. NAME OF CANDIDATE OR COM	MMITTEE	- chau	LINA DADO	II Tidos	2. REPORT COVER	RING THE PERIOD
1. NAME OF CANDIDATE OR COI COMMITTEE TO 2	LCI	MITYL	LOUP BITTER	y ruage	FROM: 7/29/1+	
3. TOTAL ITEMIZED IN-KIND CON)	Amount
4. COMPLETE THE APPROPRIATE ITE	EMS FOR E	ACH ITEMI	ZED IN-KIND CONTRIBI	UTION (in-kind contributions totaling	more than \$100 from any cor	ntributor during the period)
First Name		Middle Nar		In-Kind Contribution Received		Value of In-Kind Contribution
Last Name/Organization Name					General Election	Value of its ratio Continuation.
Last Name/Organization Name				Runoff (Local Election	ns 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 Nan	me	In-Kind Contribution Received		Value of In-Kind Contribution
Last Name/Organization Name		1		Primary Election	General Election	
		$\overline{}$	-	Runoff (Local Election	is 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-Rind Contribution Received		Value of In-Kind Contribution
Last Name/Organization Name		<u> </u>		Rrimary Election	General Election	
				Runoff (Local Elections	s Only)	
Address				Date of In-Kino Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer)		
First Name	THE PERSON NAMED IN	Middle Name	ne	In-Kind Contribution Received	l For:	Value of In-Kind Contribution
Last Name/Organization Name		<u></u>			General Election	700000000000000000000000000000000000000
Edst (Vallier Organization Home				Runoff (Local Elections	s Only)	
Address		/		Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer					
First Name	1	Middle Name)	In-Kind Contribution Received	d For:	Value of In-Kind Contribution
.ast Name/Organization Name		_		Primary Election	General Election	10. 1-07/2004/05/05/05/05/05/05/05/05/05/05/05/05/05/
				☐ Runoff (Local Elections	Only)	
Address				Date of In-Kind Contribution	1	Aggregate this Election
Dity		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer)		
	in a Table on the con-					
5. TOTAL ITEMIZED IN-KIND CONT			0.0			
(Carry forward to item 3. of next page if addit (If this is the last page of in-kind contribution:)		
r.^						





ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO ELLE		ey Judge 2. REPORT COVE FROM: 7/29/14	ERING THE PERIOD TO: 9(30/14
3. TOTAL ITEMIZED CAMPAIGN EXPENDI			Amount
		expenditures totaling more than \$100 to any payee during the p	period)
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name LEBAWON DEMOCI	RAT	AD'S	270.00
Address P.O. Box 430		CK 1023	270,00
CILY LEBANON	State Zip Code 74 37081	CK 1025 8/11/14	210,00
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name KROGER		GASOLENE	151.00
Address WEST MAI	N St		
City LEBANON	State Zip Code 744 3-7087	PAID BY VISA CARD CK 1024 8/7/14	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name OFFICE MAX		OFFICE SUPPLIES	39-20
Address So-CUMBENLE	IND St	CK 1024 8/7/14	
LEBANON T	State Zip Code 3-108-7	CK 1024 8/7/14 PAID BY VISA CARD	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name LAST STORE	BANK	SERVICE CHARGE	10.00
	V St, POBOX 724		10.00
City LEBANON	State Zip Code TW 37087		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name (EPAR 3 Toute 15	BANK		2517
Address P.D. Box 724		INTRES!	35.67
LEBANGH	State Zip Code TW 31087	INTREST CK 1026 8/11/14	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name PAPER MILL		DETICO SUPPLIES	
ddress Public Sc	Du ARE	OFFICE JUITRIES	38.24
IEBANDAL	State Zip Code 3:1087	OFFICE SUPPLIES CR 1027 8/15/14	
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 mus			914-11 AB





ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

= 1/0/1 = 1.	2. REPORT COVE	RING THE PERIOD
I HAYWOOD MA	PRY Judge FROM: 7/29/14	TO: 9/30/14
TURES FROM PRECEDING P.	AGE (enter \$0 if first itemized page)	S44-11
LEACH ITEMIZED EXPENDITURE	E (expenditures totaling more than \$100 to any payee during the pr	eriod) 814,11 ×
Middle Name	Purpose of Expenditure	Amount of Expenditure
FFice	De TOLE	19 (0
•		19.60
State Zip Code 31087	CK 1028 8/16/14	
Middle Name	Purpose of Expenditure	Amount of Expenditure
	CK 1029 8/30/14	0
ST	GASOLENE	96.71
State Zip Code 31087	PAIDBY DISA CARD	
Middle Name	Purpose of Expenditure	Amount of Expenditure
BANK	SEDVICE CHARGE	10 - 0
	JUNEVICE CITY	10.00
TW 37087		
Middle Name	Purpose of Expenditure	Amount of Expenditure
BAKK		
	1047RES1	35.67
State Zip Code Tw/ 3-1087	CK 1030 9/12/14	
1001	101000	
Middle Name	Purpose of Expenditure	Amount of Expenditure
	Purpose of Expenditure	
Middle Name	Purpose of Expenditure NOTE & INTREST IN FALL	
Middle Name	Purpose of Expenditure	
Middle Name State Zin Code	Purpose of Expenditure NOTE & INTREST IN FALL	
Middle Name BANK State Zip Code 31081	Purpose of Expenditure NOTE & INTREST IN FALL CK 1031 9/26/64	GO 14-31 Amount of Expenditure
Middle Name State Zip Code 31081 Middle Name	Purpose of Expenditure NOTE & INTREST IN FALL CK 1031 9/26/64 Purpose of Expenditure	6014.31
Middle Name BANK State Zip Code 31081	Purpose of Expenditure NOTE & INTREST IN FALL CK 1031 9/26/64 Purpose of Expenditure DONATION TO	GO 14-31 Amount of Expenditure
	TURES FROM PRECEDING PREACH ITEMIZED EXPENDITURE Middle Name State Zip Code TW 31087 Middle Name State Zip Code TW 31087 Middle Name State Zip Code Middle Name State Zip Code TW 31087 Middle Name State Zip Code TW 31087	TURES FROM PRECEDING PAGE (enter \$0 if first itemized page) REACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the page) Middle Name Purpose of Expenditure Purpose of Expenditure CK 1028 8/16/14 Middle Name Purpose of Expenditure CK 1029 8/30/14 CK 1028 8/16/14 CK 1028 8/16/14 CK 1028 8/16/14 CK 1028 8/16/14 CK 1028 8/30/14 CK 102





ITEMIZED STATEMENT OF LOANS - CANDIDATEN COMMISSION

1. NAME OF CANDIDATE OR COMMITTE	E						REPORT	COVE	RING T	HE PERIOD
COMMITTEE TO ELECT	- Day	(300)	D RA	PUT.	1800	1	FROM:		TO:	1 / / /
3. COMPLETE THE APPROPRIATE ITEMS	FOR EACH	ITEMIZ	ZED LOAN	(loans totaling m	ore than \$10	00 from any sou	7/29/	eriod)	17/	130/17
Complete the Following for the Source of the Loa			STATE OF THE PARTY.							
First Name Middle N			Outstanding (Beginning	Loan Balance	Loan	- m	Loan	Ou		Loan Balance
Last Name/Organization Name							Payments = 014,31		(End of	Period)
CEDAR STONE BAN	IK			00.00	14.	31 6			(<u> </u>
P.O. BOX 724			Loan Receiv		Genera	al Flection	Date of Lo.	an		
City LEBAHON State	Zip Code	37	☐ Runoff	(Local Elections C	Only)			RIL	11/3	2014
	The second second second		or Above Loa	n (If more spac	e is neede	ed please atta	ch a page)			
First Name	Middle Nam	10		First Name				Middl	le Name	
Last Name/Organization Name	0			Last Name/Orga	anization Na	ime				
Address				Address						
City	State	Zip Co	ode	City				State	1	Zip Code
Amount Guaranteed Outstanding				Amount Guarant	teed Outstar	nding		-		
First Name Middle Name First Name							Middle Name			
Last Name/Organization Name				Last Name/Orga	nization Na	me				·
Address				Address						
City	State	Zip Co	de	City				State	Z	ip Code
Amount Guaranteed Outstanding				Amount Guarant	eed Outstan	nding				
First Name	Middle Name	9		First Name				Middl	le Name	
Last Name/Organization Name				Last Name/Orga	nization Nar	me				
Address				Address						
City	State	Zip Coo	de	City				State	7	Zip Code
Amount Guaranteed Outstanding				Amount Guarante	eed Outstan	ding				
First Name	Middle Name		and the second	First Name				Middle	Name	
Last Name/Organization Name	<u> </u>			Last Name/Orgar	nization Nan	ne		l		
Address				Address						
City	State	Zip Cod	le	City		4		State	Zi	p Code
Amount Guaranteed Outstanding				Amount Guarante	ed Outstand	ding				
4. Totals for all Loans (complete on last page of (Total loans received should also be shown in item 16. on s	itemized loa	ns)		Outstanding Loar (Beginning of F		Loans Received	Loan Payme			ding Loan Balance d of Period)
(Total loan payments should also be shown in item 20. on s (Total outstanding loan balance should also be shown in item	summary page.)			6000		14.3				O or Period)





OCT 6 - 2014 (2) WILSON COUNTY ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE MISSION

EE 11	10.0000	0 /	2. REPORT CO	VERING THE PE	RIOD
ECTHI	HYUUND A	ARRY Judge	FROM: 7/2	9/14 TO:	9/30/14
IS FOR EAC than \$100 or	HITEMIZED	Outstanding Balance	Debt Incurred	Payments This Period	Outstanding Balance (End of Period)
Middle N	ame			-	
		* OVER	ESTIMA	ran Fox	
		GAS0457	ve Revi	usey on	LAST REPOR
State	Zip Code				
		1			
Middle Na	ame	T /			
		4 /			
State	Zip Code	7 \			
					L
Middle Na	me				
		-			
	A Arrest Control of the Control of t				
State	Zip Code	1			
Middle Nar	me				
		- /			
		/			
State	Zip Code				
Middle Nan	ne				
		1\			
State	Zip Code	1\			
	L			1	
			1		
column must	also be shown	20585	0	190-20	0
	IS FOR EAC than \$100 or g period) Middle N State Middle Na State Middle Na State Middle Na State	IS FOR EACH ITEMIZED than \$100 owed to any g period) Middle Name State Zip Code Middle Name State Zip Code Middle Name State Zip Code	IS FOR EACH ITEMIZED than \$100 owed to any g period) Middle Name Middle Name Middle Name Middle Name	SFOR EACH ITEMIZED than \$100 owed to any g period) Middle Name State Zip Code Middle Name State Zip Code	State Zip Code State Zip Code Middle Name State Zip Code Middle Name Middle Name Middle Name Middle Name Middle Name State Zip Code Middle Name Middle Name Middle Name Middle Name Middle Name State Zip Code