OCT 9 - 2014

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT COUNTY

For State and Local Candidates
For Single-Candidate Committees

1 of onigit-candidate committees								
1. DATE OF REPORT 2	/. /	DATE OR COMMITTEE RATE AS	. (
2.b. IF COMMITTEE, NAME OF CANDIDATE	1) 6.	enre 143	3. ELECTION DATE					
As CAMPAIGN APPRICA			Nov. 9	7, 2014				
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	ity , /	State	Zip Code	Phone				
3/55 Leeville M.	Lebara	The	37090 615-	809-4133				
4.b. CANDIDATE'S HOME ADDRESS (if different the Street or Rural Route	an 4.a.) ity	State	Zip Code	Phone				
5. OFFICE SOUGHT (include district number, if ap	pplicable) 6.	NAME OF POLITICAL T	REASURER (may be ca	andidate)				
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	QUARTER PRIM	RE- PRE-	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL				
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b.	ENDING DATE OF REPOR	RTING PERIOD	OUT LEMENT L				
9. (Check one)		3ep 50,	2614					
 a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period. 								
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or 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.								
Der Osh	10-6-2014	Dhu	Ph	10-6-2010				
signature of candidate	date	signature of	political treasurer	date				
11. WITNESS SIGNATURE								
Carol Dedwar 1. signature of witness	0.9-2014 date	Card	ol Dednor re of witness	10 9-2014 date				
12. SUMMARY								
a. BALANCE ON HAND LAST REPORT			_6_	5 2				
b. TOTAL RECEIPTS THIS PERIOD			11575	657				
c. TOTAL DISBURSEMENTS THIS PERIOD			631 57	67.				
d. BALANCE ON HAND (12.a. plus 12.b. minus	12.c.)		\$ <u></u>	1025 75				
e. TOTAL LOANS OUTSTANDING			\$ <u>4</u>	157 50				
f. TOTAL OBLIGATIONS OUTSTANDING	-		\$ —	0				



OCT 9 - 2014 25

SUMMARY PAGE - CANDIDATE

WILSON COUNTY
LECTION COMMISSION

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COV	VERING THE PERIOD					
Berne Ash	FROM: 7-1-14	TO: 9-30-44					
RECEIPTS 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.)	\$ 500						
16. LOANS RECEIVED THIS REPORTING PERIOD		\$ [157 52					
17. INTEREST RECEIVED THIS REPORTING PERIOD		\$					
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$ 1657 50					
DISBURSEMENTS							
19. EXPENDITURES (other than loan payments)							
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g	g., printing, postage,	gasoline)					
\$	Management (1997)						
\$							
\$							
*	-						
v							
\$	_						
\$	_						
\$							
Total of Expenditures (\$100 or less each payee)	\$ 54 1						
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 577 50	_					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		\$63167					
20. LOAN REPAYMENTS MADE THIS PERIOD	***************************************	\$					
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		\$ 631 57					
22.IN-KIND CONTRIBUTIONS							
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$	_					
temized in-kind contributions (over \$100 from each source this period)\$							
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$							
23. OBLIGATIONS							
a. Unitemized Obligations Outstanding (\$100 or less each)	\$	_					
b. Itemized Obligations Outstanding (Over \$100 each)	\$_0	_					
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 1	12.f.)	.\$_&_					



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

A MANE OF CAMPIDATE OF COMPANY					12	
1. NAME OF CANDIDATE OR COMMITTEE	TO: 9-30-19					
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR First Name	THE REAL PROPERTY.		\$100 from any contribute			
First Name	Middle Na	ime	Contribution Received For:	Amount of Contribution		
Last Name/Organization Name Plumbens + Pope Fitten Address 225 Ben Alle	LU	572	Primary Election	\$500.00		
Address 225 Ben Alle	n K	21	Runoff (Local Election			
City Nashwile	State	Zip Code 3 726 7	Date of Contribution	Aggregate This Election		
Occupation			9-26-1	\$ 500 00		
Employer			1	1	")0"	
First Name	Middle Na	me	Contribution Received For:	Amount of Contribution		
Last Name/Organization Name				General Election	Amount of Contribution	
LUST Name/Organization Name			Primary Election	☐ General Election		
Address			Runoff (Local Election	ns 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	22		Runoff (Local Election:	s Only)		
City	State Zip Code		Date of Contribution	Aggregate This Election		
Occupation	Occupation					
Employer						
First Name	Middle Name		Contribution Received For:		Amount of Contribution	
ast Name/Organization Name	Name/Organization Name		☐ Primary Election ☐ General Election			
Address			Runoff (Local Elections			
City	State Zip Code		Date of Contribution		Aggregate This Election	
Occupation						
mployer						
5. TOTAL ITEMIZED CONTRIBUTIONS			And the State of t		1	
(Carry forward to item 3. of next page if additional pages (If this is the last page of contributions, this amount must					\$ 500	
					-	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATESSION

1. NAME OF CANDIDATE OR COMMITTEE	T COVERING THE PERIOD							
	1-14 TO: 9-80-18 Amount							
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	-0							
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)								
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure					
Last Name/Business Name Jevel Szys Address		Signs & France	257 50					
229 W. tomest								
City Lebana	State Zip Code 37087							
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure					
Last Name/Business Name CREATTVR Greghics		Penting	\$ 32 72					
Address 100 Oak St.		- TRIVING	1 72					
Lebassu	State Zip Code Tw 370 87							
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure					
Last Name/Business Name Leby www Persons Address	J.	AJ	\$ 160					
402 N. Combr	Jar							
Leba w	State Zip Code 7227							
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure					
ast Name/Business Name WrlSow Post			\$ 160 00					
Address		No	1. 700					
Lebana	State Zip Code 77037							
irst Name	Middle Name	Purpose of Expenditure	Amount of Expenditure					
ast Name/Business Name Cheative Casphres ddress		PRINTING	16 39					
100 Oak ST	γ							
Lebans	State Zip Code 770 87							
irst Name	Middle Name	Purpose of Expenditure	Amount of Expenditure					
ast 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 are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)								



WILSON COUNTY ITEMIZED STATEMENT OF LOANS - CANDIDATEON COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE 1. NAME OF CANDIDATE OR COMMITTEE 1. NAME OF CANDIDATE OR COMMITTEE						FF	2. REPORT COVERING THE PERIOD FROM: TO: P-3-44				
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)											
Complete the Following for the Source of the Loan											
First Name Beaute	First Name Middle Name Outstan				ng Loan Balance Loans Loan Outstanding Loan Balan ng of Period) Received Payments (End of Period)						
Last Name/Arganization Name			8	9 11575 O #1157 5						50	
7/55 / wewill 1			Loan Receive	60900000 0000000 00							
City Leba va	State	Zip Code		Runoff (Local Elections Only)				9-18-14			<i>y</i>
	st All Endor		THE REAL PROPERTY.	or Above Loa	NAME OF TAXABLE PARTY.	ice is neede	d please attac	h a page)			
First Name		Middle Name			First Name Middle Name						
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City		State	Zip Co	ode	City			/	State		Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding							
First Name Middle Name				First Name Middle Name							
Last Name/Organization Name			Last Name/Organization Name								
Address			Address								
City State Zip Co		de /	City				State		Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding							
First Name		Middle Name	/		First Name Middle Name						
Last Name/Organization Name				Last Name/Organization Name							
Address		/			Address						
City	State Zip Co		Zip Co	de	City State						Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding							
First Name Middle Name				First Name Middle Name							
Last Name/Organization Name			Last Name/Organization Name								
Address			Address								
City		State	Zip Cod	de	City				State Zip Code		
Amount 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.)			Outstanding Lo					anding Loan Balance (End of Period)			
(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.)			HA	32	11772	-6					