## CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

	Single-Candi	refe countill?	WILE	
1. DATE OF REPORT	2.a. NAME OF CANDI	DATEORCOMMITTEE JK BUST	EELOGIPO	PONINGER
2.b. IF COMMITTEE, NAME OF CANDIDATE	1 10//	,, trop/	3. ELECTION, DATE/	COMMISSIO
			8/2/2	2018 ON
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	State	Zip Code	Phone
1804 LAKE MEADEW	TRL MTSVI	UFT IN	37122 61	5714-8775
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	than 4.a.) City	State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if	applicable) 6.	NAME OF POLITICAL	TREASURER (may be ca	ındidate)
COMMISSIONER DIS	$\tau s$	FRANK	BUSH	
7. CATEGORY OR REPORT (Check one)  FIRST SECOND THIRD  QUARTER QUARTER QUARTER		D Z RE- PRE- MARY GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b.	ENDING DATE OF REPO	<i>1</i>	
9. (Check one)		1/23	18	
a. This campaign is exempt from detailed	l dieclosura bosovaa aan	ributions (includion in 1.i.		
tures total \$1,000 or less for this repor	ting period. (Complete it	ems 12d., 12e. and 12f.)	id) received total \$1,000	or less AND expendi-
b. This campaign is required to file a deta and/or expenditures total more than \$	ailed financial disclosure to 1,000 for this reporting pe	pecause contributions (in riod.	cluding in-kind) received	total more than \$1,000
10. I/we do solemnly swear or affirm that the inflaction accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we statement of the fandidate or for any other nonpositions.  Signature of candidate	is and expenditures requi wear or affirm that no car	ired to be reported by the npaign contributions have d by the federal internal	candidate committee by	the Campaign
11. WITNESS SIGNATURE  signature of witness	7 <u>  2</u> 4  <u>18</u>	<u> </u>	ire of witness	7/24/18 date
12. SUMMARY			J 4	
a. BALANCE ON HAND LAST REPORT			s	
b. TOTAL RECEIPTS THIS PERIOD			, 1921.70	
c. TOTAL DISBURSEMENTS THIS PERIOD			1921,70	a l
d. BALANCE ON HAND (12.a. plus 12.b. min	us 12.c.)	·····	s	4
e. TOTAL LOANS OUTSTANDING			\$ _	846,76
f. TOTAL OBLIGATIONS OUTSTANDING			<u></u>	396.75



## **SUMMARY PAGE - CANDIDATE**

	DIDATE OR COMMITTEE (In Full)	14. REPORT COVER NO. THE HERIOD
	HNK BUSH	FROM: 7/1/13 TO: 7/90/1/3
RECEIPTS  15. CONTRIBUTION	iS (other than loans and interest)	
a. Unitemized Co	ontributions (\$100 or less from each source this period)	\$ 75.00
b. Itemized Cont	ributions (over \$100 from each source this period)	\$
	RIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	
16. LOANS RECEIV	ED THIS REPORTING PERIOD	\$ (846,70
17. INTEREST REC	EIVED THIS REPORTING PERIOD	\$\$
18. TOTAL RECEIPT	TS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 144,70
DISBURSEMEN	ITS	
19. EXPENDITURES	(other than loan payments)	
a. Expenditures (\$1	00 or less each payee this period) (must be listed by category - e.	g., printing, postage, gasoline)
	\$	
	\$	
	\$	actività.
	\$	
***************************************	\$	
	\$	
	\$	
	\$	
Total of Expenditure	es (\$100 or less each payee)	s 10
	tures (Over \$100 each payee this period)	
	TURES (other than loan repayments)(add 19.a. and 19.b.)	100
	NTS MADE THIS PERIOD	
21. TOTAL DISBURS	EMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 1921,70
22.IN-KIND CO		
a. Unitemized in-kin	d contributions (\$100 or less from each source this period)	\$
b. Itemized in-kind o	ontributions (over \$100 from each source this period)	\$
c. TOTAL IN-KIND	CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$
23. OBLIGATION	IS	
a. Unitemized Obliga	ations Outstanding (\$100 or less each)	\$
b. Itemized Obligation	ons Outstanding (Over \$100 each)	\$ <b>\$</b>
c. TOTAL OBLIGATI	ONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	12.f.) \$

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATER

NAME OF CANDIDATE OR COMMITTEE	FRA	INK BU:	5H	2. REPORT GOVER	TO: 7/2 30/
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU				ge)	Amount/
4. COMPLETE THE APPROPRIATE ITEMS FOR E			<del> </del>	<u> </u>	iod)
First Name	Middle Nar	пе	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	-+	PROMO	MAILE	R	01105
Address P. O. BOX 930					966.85
City MT SULIET	State	Zip Code 3)12-2			
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name RINTING		Bomo	MGILF	R	968.85
Address 0 BOX 930		<b>.</b>			
City MY JVCIET	State 1N	7 Zip Code 3712-2			
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	<u> </u>				
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	Middle Nam	е	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name Middle Name		Purpose of Expenditure		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 must	of this form a	re used.) item 19b. of summary.)			1846,70

1. NAME OF (		البسط سينته ا	D STA	ATEN	/EN	T OF LOA	NS -	CANDI	DA₹J	En. Sty
	CANDIDATE OR COM	MITTEE	_	····				2 REPORT	COVERIN	CANGERIOD
1	TO MALL OF CANDIDATE OF CONMITTEE				Rive	Н		FROM:		O Profes
3. COMPLETE	E THE APPROPRIATE	ITEMS I	OR EACH	J N J	クレン D LOAN	(loans totaling more than \$	100 from any s	ource during the p	/ [7]	11/23/13
	ollowing for the Source of	er-residenceries							Sarajan (Saran) - Mistara	
First Name		Middle Nar	<u>"</u>			Loan Balance Loan		Loan		ding Loan Balance
Last Name/Organiz	NK K (Begi		(Beginning	المنا 6		Payments	(E)	nd of Period)		
30	5 H				4		6170	4	18	76.70
Address City	LAKEME	<b>14</b> 0 State	W 17	76	•	Election Gene	ral Election	Date of Loa	1231	118
mr Ju	VL)\$[	777	3712			(Local Elections Only)		/		10
First Name	List	All Endor	sers or Guara Middle Name	SECURITY FROM THE	ove Loa	n (If more space is need First Name	led please at	tach a page)	Middle Nar	nê
	ati - M			· · · · · · · · · · · · · · · · · · ·					Wilde Harie	
Last Name/Organiza	Last Name/Organization Name			Last Name/Organization Name						
Address						Address				
City			State	Zip Code		City			State	Zip Code
Amount Guaranteed	l Outstanding		1	1		Amount Guaranteed Outsta	anding		I	
First Name			Middle Name			First Name			Middle Name	
Last Name/Organiza	ast Name/Organization Name			Last Name/Organization Name						
Address						Address	<del></del>	<u> </u>		
City			State	Zip Code		City State			Zip Code	
Amount Guaranteed	Outstanding	<del></del>	<u> </u>	1		Amount Guaranteed Outsta	nding		<u></u>	
First Name		\$256-16-51 P. S.	Middle Name		onessas estados de la como de la	First Name Middle Name				
Last Name/Organiza	ation Name					Last Name/Organization Name				
-										
Address						Address				
City	-i-i		State	Zip Code		Спу		State	Zip Code	
Amount Guaranteed	Outstanding		L	<b>L</b>		Amount Guaranteed Outstanding				
First Name			First Name			Middle Name				
ast Name/Organiza				Last Name/Organization Name						
-	····	~								
Address	ddress		Address							
City			State	Zip Code		City			State	Zip Code
Amount Guaranteed Outstanding			1	Amount Guaranteed Outstanding						
. Totals for all Loans (complete on last page of itemized loans)			NEGRECAL SALES	Outstanding Loan Balance	Loans	Loan		tstanding Loan Balance		
(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.)				(Beginning of Period)	Received 184/2	<del></del>	RS	(End of Period)		

SS-1132 (Rev. 4/02)