CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

JAN 19 2010

1. DATE OF REPORT 1 - 16 - 18		ANDIDATE OR C		\ a	a 2.63	CHANGES		
	ED HI	4 GERTY	FOR	mAYOI		weeks State V		
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE							
ED HAGERTY 4.a. CAMPAIGN ADDRESS AND PHONE					014			
1	City		State	Zip Code	Phone			
Street or Rural Route 3700 0LD LEBANON DI	AT RO h	or Juli	ET TW	37122	615-969	-4769		
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	than 4.a.) City		State	Zip Code	Phone			
OFFICE SOUGHT (include district number, if applicable) NAME OF POLITICA					y be candidate)			
mayor, City of m	JULIET	€.	D HAGE	EATY				
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD	FOURTH	PRE-	D PRE-	MID-YEAF	YEAR	/] -END		
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY	GENERAL DATE OF REPO	SUPPLEMEN	TAL SUPPLE	MENTAL		
7 - 1 - 17		O.D. ENDING	1 - 15.					
9. (Check one)				10				
a. This campaign is exempt from detaile.	d disclosure becaus	se contributions	(includina in-kir	nd) received total	\$1.000 or less At	ND expendi-		
 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.								
40 -the			60 16.		,			
Ed Huguey signature of candidate	1-16-18 date		signature of	political treasure	/-	16 - 18 date		
•			0.9.1.00	, pontoch trousare	'	date		
11. WITNESS SIGNATURE								
Hotoma Hagert signature of witness	1-16-18 date		signati	ure of witness	ta 1-	16-18 date		
12. SUMMARY					• lo			
a. BALANCE ON HAND LAST REPORT	•••••••••••••••••••••••••••••••••••••••			s <u>11,281.</u>				
b. TOTAL RECEIPTS THIS PERIOD					***			
c. TOTAL DISBURSEMENTS THIS PERIOD								
d. BALANCE ON HAND (12.a. plus 12.b. m	nus 12.c.)		•••••	•••••	\$ 10,800	<u> </u>		
e. TOTAL LOANS OUTSTANDING								
f. TOTAL OBLIGATIONS OUTSTANDING		.,			\$	·		



JAN 19 2018

SUMMARY PAGE - CANDIDATE

WILSON COUNTY

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COV	ERING THE PERIOD			
			TO: 1-15-18		
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)					
a. Unitemized Contributions (\$100 or less from each source the	nis period)	\$			
b. Itemized Contributions (over \$100 from each source this pe	eriod)	\$			
c. TOTAL CONTRIBUTIONS (other than loans and interest)(a	\$				
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	n 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	e.g., printing, postage,	gasoline)		
	\$				
(SER ATTACHES)					
		POTATAL			
		.=			
	\$				
	\$	~~~~~			
	\$				
	\$				
	\$				
	\$				
		-			
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	c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)				
20. LOAN REPAYMENTS MADE THIS PERIOD	\$				
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be show	n in item 12.c.)	••••••••••••••••••••••••••••••••	\$ 474.67		
22.IN-KIND CONTRIBUTIONS					
a. Unitemized in-kind contributions (\$100 or less from each source	ce this period)	\$			
b. Itemized in-kind contributions (over \$100 from each source this	s 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)					
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	1 12.f.)	\$		



JAN 19 2018

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATEY

1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVER								
ED HAGERTY FOR MAYOR FROM: 7-1-17					TO: /_ /5- 18			
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount							
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)								
First Name BILL	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name CAREEA			WEB 5	. -	25.16			
Address] WEB 3	116	23.76				
City MT JULIET	State	Zip Code 3フ/2ン						
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name FRIENDS OF RAY JUSTICE								
Address			CONTRIBU	now	200.00			
oity mt Juliet	State	Zip Code 37/22						
First Name	Middle Nam	ne	Purpose of Expenditure	:	Amount of Expenditure			
Last Name/Business Name m J SR CITIZENI CENITER								
Address			CONTRIB	LTON	42.00			
mr Juliet	State	Zip Code						
First Name	Middle Nam	37,22	Purpose of Expenditure		Amount of Expenditure			
		- Corpose of Experionare		Amount of Expenditure				
Last Name/Business Name MT 5A CITIZEN CENTER								
Address		CONTRIBA	c70~	42.00				
mt. Juliet	State	Zip Code ろフィンン						
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name FREEDOM PAC								
Address		CONTRIBU	TION	100.00				
mr Juliet	State	Zip Code ろフ/ンプ						
First Name &	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name HAUEATY		RumBun	STMENT -					
Address			Rempure Volunteer	6 	65.51			
MT JULIET	State T~	Zip Code 37/2ン	VoluniThe2	CVENT				
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 must		•			474.67			

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