CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	12. 1115.55		Sommitte	res	_0CT 2 7 2020 `
10-26-20	2.a. NAME OF C	ANDIDATE OR (COMMITTEE		the state of the s
	15 e	RNIE	As 4		WILSON COUNTY
2.b. IF COMMITTEE, NAME OF CANDIDATE				3 ELECTION DA	ETION COMMISSION
				J. CLECTION DA	IE . ALL COMMISSION
4.a. CAMPAIGN ADDRESS AND PHONE				Nov	3,2020
Street or Rural Route	City		C1 /		
726 Brockten St	- 1 /		State	Zip Code	Phone
4 h CANDIDATE'S HOME ADDRESS	Lebaus		1w	37087	615-804-433
4.b. CANDIDATE'S HOME ADDRESS (if differen Street or Rural Route					J. J., , J.
	City		State	Zip Code	Phone
				-	
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME O	E POLITICAL T	DEACURED (
Mayon Lebaur Tu	·	13	FIGERICAL	REASURER (may b	e candidate)
7. CATEGORY OR REPORT (Check one)		/ <i>></i> €	RNIE	As4	
					
FIRST SECOND THIRD	FOURTH	L.J PRE-	2005		
QUARTER QUARTER QUARTER	0/1455	PRIMARY	PRE- GENERAL	MID-YEAR	YEAR-END
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDINGD	ATE OF REPOR	SUPPLEMENTAL STING PERIOD	SUPPLEMENTAL
027. 1, 2020					
9. (Check one)		U_{CI_1}	24,	2020	
 a.	disclosure because	contributions (i	ncluding in-king	() specifical to the first	••
tures total \$1,000 or less for this report	ing period. (Comple	te items 12d., 1	12e. and 12f)	i) received total \$1,0	00 or less AND expendi-
b. This campaign is required to file a data	9_16		,		
 b. This campaign is required to file a deta and/or expenditures total more than \$1 	ned financial disclosu	ire because co	ntributions (incl	uding in-kind) receive	ed total more than \$1,000
Total More dian pr	ooo ioi tiis reporting	period.		,	- 1- 1- 1.10 γ C W C W C T T T T T T T T T T T T T T T
10. I/we do solemnly swear or office that it					
	rmation contained in	this campaign	financial discle	Sure report is true o	and that this
individi Disclusure Act. Additionally Physics.	to one and the state of			vandidate committee	by the Campaign
Financial Disclosure Act. Additionally, I/we sw benefit of the candidate or for any other nonpo	olitical nurnose as do	campaign cont	ributions have	been expended for the	ne personal financial
	micai paipose as de	imed by the fed	teral internal re	venue code.	
Die Cl	17-	\ 4	Δ	~ 1	
signature of candidate	Oct. 25, 20.		They	- COG	AT 25, 2041
g. ratar o or ourididate	date '		signature of p	olitical treasurer	date
					dato
11. WITNESS SIGNATURE		_			
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- Moton D Bandale	10-26-202	·	rappa	(10 7/ 0.00
signature of witness	II AU XUX	$U = I\Lambda$	Mulle	-Ush	110 de 2014
	date		signature	of witness	date
12 CHRANADY					
2. SUMMARY					
a. BALANCE ON HANDI AST DEDODE				. Ilium a man	
a. BALANCE ON HAND LAST REPORT	,		\$.	41150,82	
b. TOTAL RECEIPTS THIS PERIOD	.,,		\$ -	\$100,00	
C TOTAL DICTURATE TO THE				~i	
c. TOTAL DISBURSEMENTS THIS PERIOD	***************************************		·····.\$ -	5778,51	
d. BALANCE ON HAND (12.a. plus 12.b. minus	3 12.c.)			•	5452,26
				\$ _	
e. TOTAL LOANS OUTSTANDING					2/
d. BALANCE ON HAND (12.a. plus 12.b. minus				\$ <u>-</u>	4,000,00
					/
f. TOTAL OBLIGATIONS OUTSTANDING					1
		********		······	· V



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14 REPORT COVERNO TUE
RECEIPTS	14. REPORT COVERING THE PE
15. CONTRIBUTIONS (other than loans and interest)	NECEIVI
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 15.1	007 27 200
b. Itemized Contributions (over \$100 from each source this period)	\$ 100 00 - WILSON
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.1	ELECTION COUNTY
TO LOWING NECEIVED THIS REPORTING PERIOD	a sound of
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ 7000
16. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	5 The Fy
DISBURSEMENTS	\$ 3700
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category	
Mail out \$ 4653	e.g., printing, postage, gasoline) عن ا
Nd - Democrat	~ 02
PoweTis	12
\$ 100	<u> </u>
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3	
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Total of Expenditures (\$100 or less each payee)	\$ • •
. Itemized Expenditures (Over \$100 each payee this period)	\$ 5778.56
. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	e 5770 75
LOCATALEATMENTS MADE THIS PERIOD	
TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 5778 51
IN-KIND CONTRIBUTIONS	\$ 37700
Unitemized in-kind contributions (\$100 or less from each source this period)	\$ 0
Itemized in-kind contributions (over \$100 from each source this period)	s -Q
TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.	A
OBLIGATIONS	
Unitemized Obligations Outstanding (\$100 or less each)	• 4
Itemized Obligations Outstanding (Over \$100 each)	• 4
TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	*



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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE ONLY

1. NAME OF CANDIDATE OR C	OWNVIII TEE	Ruine A		REPORT COV	LECTION COMMISSI ERING THE PERIOD	
			C: 9	FROM: 16-1-20	TO: 10-24-2	
3. TOTAL ITEMIZED CAMPAIGN	CONTRIBUTION	NS FROM PRECEDI	NG PAGE (enter \$0 if first itemized pag	e)	Amount	
4. COMPLETE THE APPROPRIATE	ITEMS FOR EACH	I ITEMIZED CONTRIBL	JTION (contributions totaling more than \$10	-/ 0 from any contribut	nr)	
First Name	Charle's + Range Middle Name			Contribution Received For:		
Last Name/Organization Name				Primary Election General Election		
Haskns			LI Printary Election LLP (Beneral Election	\$10000	
Address 924 Phelan	/):		Runoff (Local Elections C)nlv)	100	
City /	State Zip Code		Date of Contribution			
Decupation / /		v 37087	Date of Continuation		Aggregate This Electio	
Lebrun Ch.	wal 1	P.	10-22-21		\$100 00	
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irst Name	Midd	lle Name	Contribution Received For:	and the contract of the contra		
ast Name/Organization Name					Amount of Contribution	
- 3			Primary Election Ge	eneral Election		
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	Sidle	Zip Code	Date of Contribution	per constitution of the second	Aggregate This Election	
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st Name	Middle	Name	Contribution Received For:			
st Name/Organization Name					Amount of Contribution	
3 controlled HOFFIC			Primary Election Gen	eral Election		
dress			Runoff (Local Elections Only	,		
	0-1-	17:0:)		
	State	Zip Code	Date of Contribution		Aggregate This Election	
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Name	Middle N	ame	Contribution Received For:	Constant Constant of Constant of the		
Name/Organization Name	_/			ļ	mount of Contribution	
/			Primary Election Gener	ral Election		
ess			Runoff (Local Elections Only)	Runoff (Local Flortions Only)		
	0:-1	12.64				
	State	Zip Code	Date of Contribution	A	ggregate This Election	
pation						
yer						
	WAR TO STREET					
		k manang kapa manag salah s		on the second second second second second	The a decision of the content of the	
OTAL ITEMIZED CONTRIBUTION	VS.			l l		
OTAL ITEMIZED CONTRIBUTION Carry forward to item 3, of next page if addition f this is the last page of contributions, this are	anal names of this form	are used.)				

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OCT 27 2020

ITEMIZED STATEMENT OF EXPENDITURES - CANDIPDATES

NAME OF CANDIDATE OR COMM	Bernie	Ash PROM	RT COVERING THE PERIOD
3. TOTAL ITEMIZED CAMPAIGN EVO		16	7-2. TO: 10-24-21
4. COMPLETE THE APPROPRIATE ITEM	S FOR FACH TEMPER EXPENSE	ING PAGE (enter \$0 if first itemized page)	Amount 45-778, 3-6
First Name	TAGE OF EXPENDE	ITURE (expenditures totaling more than \$100 to any payee of	uring the period)
	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name	1		
Address OAL S	(graphics	Mail out	\$4653.5
ORL S	T		4765 307
Lebaun	State Zip Code 37087		
First Name			
not receive	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name			and an experience
Lebarin De	mocrat	Ad	
udress		Nc Nc	\$102500
ity / /	State Zip Code		1"/07
Lebanou	Tu 37087		
rst Name	Middle Name	Duman (F	
st Name/Business Name	Tallio .	Purpose of Expenditure	Amount of Expenditure
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dress John Jan Jan Jan Jan Jan Jan Jan Jan Jan Ja	MISTORY LONGINITT	Dowet 10-	\$100 00
Y 0 1		13000110	
Lebanon	State Zip Code		
	Tr 37087		
st Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
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Name	Middle Name	Purpose of Expenditure	to and the first of the confirmation of the co
Name/Business Name		a upose of Expenditure	Amount of Expenditure
ess		 	
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ame/Business Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ame/Business Name	Middle Name State Zip Code	Purpose of Expenditure	Amount of Expenditure

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OCT 27 2020

ITEMIZED STATEMENT OF LOANS - CANDIDATE COUNTY

1. NAME OF CANDIDATE OR	001111777					- MIE		ADN'COMAIL
. MANUE OF CANDIDATE OR						2. REPO	ORT COV	ERING THE PERI
	15er	wic	As.	l _t		FROM:		TO: 10-24-2
3. COMPLETE THE APPROPR	IATE ITEMS FOR E	ACH ITEMI	ZED LOAN	/ (loans totaling more t	han \$100 from now	10-1	- 20	10-24-2
Complete the Following for the Sour	ce of the Loan		soldings of the soldings	(control of the cont	nan proc nom any :	source auring	ine period)	
First Name	FERSIL AL		Outstandin	g Loan Balance			····	
Beraic Attack Last Name/Organization Name	Layd		(Beginnin	ng of Period)	Loans Received	Loan Payments	(Outstanding Loan Balanc (End of Period)
Last Name/Organization Name			1/7	000 = 1	5000	0	- 4	
Address					7000	v	#	21000
726 BarbTer	St.		Loan Rece	• • • • • • • • • • • • • • • • • • • •		Date o	f Loan	
City 1	State Zip C	ode	☐ Prima	ary Election 🕡	General Election		18-	16 - 2 2
Address 776 Brich Ten City Lebann	Tu 37	087		f (Local Elections Only)		1 '	•	16-27
	List All Endorsers or	Guarantors fo	or Above Lo	an (If more space is r	needed please at	tach a page)		
irst Name	Middle	Name		First Name	iles emilye an english seeply as en	Aller Miller Com	an territoria	le Name
ast Name/Organization Name				l cottless (C				TO THE STATE OF TH
				Last Name/Organizati	on Name			
Address				Address		····		
City	State	7:000	4-					
	Ctale	Zip Cod	эe	City			State	Zip Code
nount Guaranteed Outstanding				Amount Guaranteed Ou	utstanding	/		
rst Name	LAC-JI.	ere er	provide and property of the second	and the substitute of the subs		ar Charles Polymer		
	Middle I	vame		First Name			Middle	Name
st Name/Organization Name				10011100000				
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dress		-		Address		***************************************		
ly	State	Zip Code		⊘ fly		·····		
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ount Guaranteed Outstanding				Amount Guaranteed Out	standing			
st Name	Middle N	200		Marin estable out to one established the	· Maria and a superior and a superio	er di kalan er galleger eve	A CONTRACTOR OF THE PARTY OF TH	
	Ivirodie 14	altie		First Name			Middle	Name
Name/Organization Name		/	Į.	ast Name/Organization	Name	· · · · · · · · · · · · · · · · · · ·		
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Name	Middle Nar	ne	Fi	rst Name	en e	en englis vans	7.000	an and a second of the second of the
ame/Organization Name			Middle Name					
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als for all Loans (complete on least	nece of it	ek inggasebbagishib-agg						
als for all Loans (complete on last I foans received should also be shown in its	em 16 on cummou na			Islanding Loan Balance	Loans	l.oan	C	outstanding Loan Balance
l loan payments should also be shown in ite outstanding loan balance should also be sh	200 20 an aumment	N	7	Beginning of Period)	Received	Paymer	nts	(End of Period)
SS-1132 (Rev. 4/02)	Own in Rem 12.e. on front	page.)		7000 =	5000	-0-	18	2/000 30