CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1.	DATE OF REPORT	v Single-Ca			ees	
1	23-July-2018	2.a. NAME OF				0
2.b.	IF COMMITTEE, NAME OF CANDIDATE	Commit	tee to	Elect (ames "Rust 3. ELECTION DATE	y Keith
					2018	
4.a.	CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City				
180	2 Chaparral Dr.	Lebon		State	Zip Code	Phone
4.b.	CANDIDATE'S HOME ADDRESS (if differe		or \	TN.	37087	
ł	Street or Rural Route Same	City		State	Zip Code	Phone
	OFFICE SOUGHT (include district number,	if applicable)	6. NAME (DE POLITICAL	TREASURER (may be	
Sch	nool Board Zone	7	David	d Ear	I Q 1	candidate)
7.	CATEGORY OR REPORT (Check one)	,,,,,	<u> </u>	z car	1 Bates	W
	FIRST SECOND THIRD QUARTER QUARTER	FOURTH	L_J PRE-	PRE-	MID-YEAR	YEAR-END
	QUARTER QUARTER QUARTER BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY 8.b. ENDING	GENERAL DATE OF REPO	SUPPLEMENTAL RTING PERIOD	SUPPLEMENTAL
	7-1-18			23-18		
9. (CI	neck one)			2,0		
а	This campaign is exempt from detaile tures total \$1,000 or less for this report	d disclosure becaus	e contributions	(including in-kir	nd) received total \$1,000	or less AND expendi-
	/		icie ilcinis 12u.,	12e. and 12f.)		
b	This campaign is required to file a de and/or expenditures total more than \$	tailed financial disclo	sure because c	ontributions (in	cluding in-kind) received	d total more than \$1,000
10.	I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution	formation contained	in this campaig	n financial disc	losure report is true an	d that this report is an
ı	Financial Disclosure Act. Additionally, I/we:	Swear or affirm that r	nedaneo (o be	repurted by the	candidate committee b	by the Campaign
	Denefit of the candidate or for any other non	political purpose as o	defined by the fe	ederal internal i	evenue code.	e personal financial
1 1	amis & Kuth	23-July-18	2	18 .		
7	signature of candidate	date) <u>~</u>	signature of	political treasurer	7-23-/8
/						Cate
¹¹ (2)	ATNESS SIGNATURE		(V	0 1	
$\langle \rangle \mu$	level (O. Brites) 2	13-71 18	A	ho. Di	Or Kata	ne + 1/10
<u> </u>	signature of witness	date		Signatu	C. Dales re of witness	23-Judy 18
					o o waness	uate
12. SU	IMMARY					
a.	BALANCE ON HAND LAST REPORT		•••••	\$	1,140. 25	
b.	TOTAL RECEIPTS THIS PERIOD				1850 75	i
				\$	1,859.75 3,000.99	
C.	TOTAL DISBURSEMENTS THIS PERIOD	***************************************		\$	3,000.00	
d.	BALANCE ON HAND (12.a. plus 12.b. mir	nus 12.c.)			¢	Ø
е.	TOTAL LOANS OUTSTANDING		The last the last	. K B. Broze Assaw	<i>-</i>	Ø
f.	TOTAL ORLICATIONS OF TOTAL SHIP	,	RECE	IVED	7	7
1.	TOTAL OBLIGATIONS OUTSTANDING	\mathcal{A}	1111 9	5 2018 N) \$ —	
C		110	JUL 6	A 2010 Y.		



WILSON COUNTY TO ELECTION COMMISSION

Page 1 of <u>5</u>

SUMMARY PAGE - CANDIDATE

RECEIPTS 15. CONTRIBUTIONS (other than loans and interest) a. Uniternized 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.) 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.g., printing, postage, gasoline) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14 PERORT COVE	DIMO THE SERV
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SELECTION COMMISSION \$ Total of Expenditures (\$100 or less each payee)		_ z jul	25 2018 7
Total of Expenditures (\$100 or less each payee)	*	WILSO	NCOUNLY 9
b. Itemized Expenditures (Over \$100 each payee this period) \$\frac{3}{000}\$.\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$	ELECTION	COMMISSION
b. Itemized Expenditures (Over \$100 each payee this period) \$\frac{3}{000}\$.\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$		
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Page <u>**a**</u> of <u>**5**</u>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COM Committee to	MITTEE Elect James "Ru	sta" Keith	2. REPORT COVER	RING THE PERIOD	
	ONTRIBUTIONS FROM PRECEDING		1-344-18	TO: 23-July - 15	
4. COMPLETE THE APPROPRIATE ITE	EMS FOR EACH ITEMIZED CONTRIBUT	ION (contributions totaling more than	S100 from any contribute of		
T IT ST INJURE	Middle Name	Contribution Received For:	\$100 Horn any contributor	Amount of Contribution	
Last Name/Organization Name	<u>taye</u>	Primary Election	General Election	A STANDARD OF CONTRADUROR	
Keith		Light Fill Indian Clection		H 05	
80a Chaparra	1 Dr.	Runoff (Local Election	os Only)	559,75	
Lebanon	State Zip Code 7. 37087	Date of Contribution		Aggregate This Election	
Occupation Nurse					
Retired		6-July-20	018		
First Name Gary	Middle Name	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name	Ross	Primary Election	General Election		
Address Soa Chaparral	De	Runoff (Local Elections	Only)	#1,000.60	
Lebanon	State 7. Zip Code 37087	Date of Contribution	,	Aggregate This Election	
Cocupation Law Enforcem Employer					
Wilson Co. Sher	iff's Office.	6-July-2018			
First Name	Middle Name	Contribution Received For:	A	mount of Contribution	
James Last Name/Organization Name Keith	Ross	Primary Election	General Election	1 4	
Address 808 Chaparral City	<u> </u>	Runoff (Local Elections	Only)	300.00	
City	State Zip Code	Date of Contribution	A	ggregate This Election	
Occupation	TN. 37087			55.05dtc 1110 E3001011	
Law Enforceme	<u>nt</u>	6-July-8	MIS		
Law Enforceme Wilson Co. Gherrist Name	iff's Office				
irst Name	Middle Name	Contribution Received For:	Arr	nount of Contribution	
ast Name/Organization Name		Primary Election G	eneral Election		
ddress		Runoff (Local Elections Only)			
ity	State Zip Code	Date of Contribution	Age	gregate This Election	
ccupation					
nployer		4			
TOTAL ITEMIZED CONTRIBUTIONS		EVED			
(Carry forward to item 3. of next page if additional (If this is the last page of contributions, this amount to the contributions).	al pages of this form are used.) unt must be shown in item 190	25 2018 🐕			
SS-1131(Pay 2/06)	NAMI COA	(COUN)			