CAMPAIGN FINANCIAL DISCLOSURE STATEMENT COUNTY For State and Local Judicial Single - Candidate Committees

1. DATE OF REPORT	2.a. NAME OF			38					
1/25/16	Ellis	H Mars	hall III	Trey					
2.b. NAME OF CANDIDATE'S COMMITTEE				3. ELECTION DAT	-				
Committee to elect Tr	ey Mars	ihall Juc	lige	2014					
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		Ciar						
1316 Clearview Dr	Mt. J.	1. 4	State Tail	Zip Code つりょうっ	Phone				
4.b. CANDIDATE'S HOME ADDRESS (if different	than 4 a)	11161	1/\	<u> 37122 </u>	615-885-4335				
Street or Rural Route	City		State	Zip Code	Phone				
486 Northern Rd	Mt Julie		TN	37/22	615-444-2386				
JUDICIAL OFFICE SOUGHT (include district number, if applicable)									
General Sessions Judge	i)iv II	. Jei	mifer	M. Marsh	all				
7. CATEGORY OR REPORT (Check one)		<i>(</i> —1			74				
FIRST SECOND THIRD	FOURTH	PRE-	li PRE-	MID-YEAF	I X I ₹ YEAR-END				
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY 8 h ENDING	GENERAL DATE OF REPOR		TAL SUPPLEMENTAL				
7-1-15	i	0.0. 210/10	1-15-1						
9. (Check one)			1-10-1	<u> </u>					
a This campaign is exempt from detailed	t disalogusos haar								
 This campaign is exempt from detailed disclosures 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. SIGNATURE OF CANDIDATE		11. SIGNATUR	E OF POLITICAL	TREASURER					
		l do solem	nniy swear or affii	rm that the informatio	n contained in thiscampaign				
Ellis H. Manhall, II		financial (disclosure repor	t is true and accura	te. Additionally, I swear or				
Signatue of Candidate	Date				n expended for the personal				
				ndidate or for any ot ernal revenue code.	her nonpolitical purpose as				
Elaine Move	.1 -1.		, yn_	-01	0 1-111				
	1/25/16	XIM	sperly	Marka	40 1/25/16 1				
Signatue of Witness	/ Date	Signature	of Political Trea	surer	Date				
			·		, ,				
	ļ	<u>Clai</u>	ne 711	Dele_	1/25/16				
		Signatue	of Witness		D ate				
12. SUMMARY				210 / 4					
a. BALANCE ON HAND LAST REPORT					_				
b. TOTAL RECEIPTS THIS PERIOD			\$	- 0 -	-				
c. TOTAL DISBURSEMENTS THIS PERIOD	·····		\$	- 6-					
d. BALANCE ON HAND (12.a. plus 12.b. min	us 12.c.)			\$	367, 64				
e. TOTAL LOANS OUTSTANDING				\$	36,400.00				
f. TOTAL OBLIGATIONS OUTSTANDING	*,**********************************			\$					

JAN 29 2016 4

ITEMIZED STATEMENT OF LOANS - CANDIDATE WILSON COUNTS

									ことにひいびがくだ		
1. NAME OF CANDIDATE OR COMMITTEE						2.	2. REPORT COVERING THE PERIOD				
Committee to elect Trey Marshall Judge 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any s							FROM: TO:				
3 COMPLETE THE APPROPRIATE ITEMS	<u>dge</u>		7-1-	12	1-15-14						
		TT CIVITZ	EU LUAN	(loans totaling m	iore than \$1	00 from any sourc	e during the p	eriod)	Tallyan, indicate and the same		
Complete the Following for the Source of the Loan First Name Middle Na			Outotoodia	Lasa Dalassa							
Ellis	Middle Name		Outstanding Loan Balance (Beginning of Period)		Loan Receiv		Loan syments	Outstanding Loan Balance (End of Period)			
Last Name/Organization Name	on Name		36.4	100,00	- Ċ	- -	Č	36,400.00			
Marshall III											
986 Northern Road				.oan Received For: ☐ Primary Election							
	State Zip Code										
M f、 Juliet											
First Name	Middle Name		A TIBOTO LOE								
Lethers	whode value			First Name Middle Name							
Last Name/Organization Name			Last Name/Organization Name								
Address			Address								
City	State	Zip Co	de	City	City				Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding							
irst Name Middle Name				First Name Middle Name							
Last Name/Organization Name				Last Name/Organization Name							
Address			Address								
City	State Zip Cod			City		State	Zip Code				
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding							
irst Name Middle Name			First Name Middle Name								
Last Name/Organization Name				Last Name/Organization Name							
Address			Address								
City	State	Zip Cod	ė	City	····a	·····		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guarante	ed Oulstand	ling					
st Name Middle Name			First Name Middle Name					e			
Last Name/Organization Name				Last Name/Organization Name							
Address				Address							
City	State	Zip Code		City State Zip Code							
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding							
4. Totals for all Loans (complete on last page of itemized loans) (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.)			Outstanding Loan Balance (Beginning of Period) Received Payments (End of Period) 36,400=00 36,400;00								
SS-1132 (Rev. 4/02)	·		<u>.</u>			ำ	<u> </u>		- 1 100,00		