# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

	nd Local Candidates andidate Committees	JUL 10 2018 %
	FCANDIDATE OPICOMMUTER  FAVIAV	ELECTION COMMISSION
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE  2018	
	Ebanon Tax 37081	Phone 615) 330-8414
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City	State Zip Code	Phone
5. OFFICE SOUGHT (include district number, if applicable)  Didty ( 5	6. NAME OF POLITICAL TREASURER (May be &	andidate)
7. CATEGORY OR REPORT (Check one)  FIRST SECOND THIRD FOURTH QUARTER QUARTER QUARTER  8.a. BEGINNING DATE OF REPORTING PERIOD	PRE- PRE- MID-YEAR PRIMARY GENERAL SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
9. (Check one)	8.b. ENDINGDATE OF REPORTING PERIOD  6.30-78	
tures total \$1,000 or less for this reporting period. (Con b. This campaign is required to file a detailed financial disc and/or expenditures total more than \$1,000 for this reportant to the information contains accurate accounting of campaign contributions and expenditur Financial Disclosure Act. Additionally, I/we swear or affirm that benefit of the candidate or for any other nonpolitical purpose a signature of candidate date	closure because contributions (including in-kind) received orting period.  ed in this campaign financial disclosure report is true and res required to be reported by the candidate committee by at no campaign contributions have been expended for the	total more than \$1,000
11. WITNESS SIGNATURE  7/10/18 signature of witness date	Dandra Huntu signature of witness	7-10-18 date
12. SUMMARY	d	
a. BALANCE ON HAND LAST REPORT	\$ <del>\</del>	
b. TOTAL RECEIPTS THIS PERIOD	\$2,600	
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 1,384 31	69
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u></u>	1,31569
e. TOTAL LOANS OUTSTANDING	\$	9
f. TOTAL OBLIGATIONS OUTSTANDING	s <del></del>	9



# SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In/Full)	14 REPORT COV	ERING THE PERIO
Jerry A. Mickarland	FR9M:6-18	10:4-30-18
RECEIPTS  15. CONTRIBUTIONS (other than loans and interest)	50	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 100	_6
b. Itemized Contributions (over \$100 from each source this period)	\$ 2500	- 40
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$ 2600
16. LOANS RECEIVED THIS REPORTING PERIOD	***************************************	\$ ,
17. INTEREST RECEIVED THIS REPORTING PERIOD		\$ <i>D</i>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		.s 2000
DISBURSEMENTS		
19. EXPENDITURES (other than loan payments)		
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g	j., printing, postage,	gasoline)
WisonCounty (label) \$ 196:	<u>70</u>	
Wright Printing \$1,004.	<u>0</u> )	
Jewell Sign \$ 84.	00	
<u> </u>		
\$		
<b>\$</b>	_	i
\$		
	- Cu 41	9
Total of Expenditures (\$100 or less each payee)	84.6	
b. Itemized Expenditures (Over \$100 each payee this period)	1209.31	10013
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	,	\$ 1,084.31
20. LOAN REPAYMENTS MADE THIS PERIOD		\$
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	***************************************	\$ 1,284.31
22.IN-KIND CONTRIBUTIONS	Ø	
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$	706	
b. Itemized in-kind contributions (over \$100 from each source this period)\$	. <u>P</u>	- A
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)		·
23. OBLIGATIONS	A	
a. Unitemized Obligations Outstanding (\$100 or less each)\$	<u> </u>	
b. Itemized Obligations Outstanding (Over \$100 each)\$	4	A
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12	:.f.)\$	

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Page \_\_\_\_\_ of \_\_\_\_

### ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

	1			ERING THE PERIOD	
•	7			TO:6-30-18 Amount	
			. • /	12,500.00	
	ame	Contribution Received For:	\$100 from any contribut	Amount of Contribution	
14/	<u>len</u>		Congred Election	3	
Last Name/Organization Name  McFAYAN		Confirmally Election Confirmation		2,500 2	
ry	P.K	Runoff (Local Election			
State Zip Code 8 1		Date of Contribution		Aggregate This Election	
Middle Na	ame	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Primary Election	General Election		
Address			s Only)		
State	Zip Code	Date of Contribution		Aggregate This Election	
·					
Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Primary Election	General Election		
Address		Runoff (Local Elections	Only)		
State Zip Code		Date of Contribution		Aggregate This Election	
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Middle Name		Contribution Received For:		Amount of Contribution	
st Name/Organization Name			General Election		
Address		Runoff (Local Elections	Only)		
State Zip Code		Date of Contribution		Aggregate This Election	
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of this form ar	e used.)			2,50000	
	Middle Na  State  Middle Na  State  Middle Na  State	UTIONS FROM PRECEDING FEACH ITEMIZED CONTRIBUTION Middle Name  Middle Name  State Zip Code  Middle Name  State Zip Code	UTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page (enter	TIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)  EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contribut Middle Name	

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

Last Name/Organization Name    Prima   Runof	ontributions totaling more than \$100 from any contributor during of the contribution Received For:  Adult of Index Process  Aggregate this ontribution  Aggregate this ontribution	the period) -Kind Contributio
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind confirmation Name)  Last Name/Organization Name  Address  City  State  Zip Code  Description of In-Kind Confirmation  Date of In-Kind Confirmation  Description of In-Kind Confirmation  Description of In-Kind Confirmation  In-Kind Confirmation  Description of In-Kind Confirmation  Description of In-Kind Confirmation  In-Kind Confirmation  Description of In-Kind Confirmati	Amount st itemized page)  contributions totaling more than \$100 from any contributor during intribution Received For:  Aggregate this  Contribution  Aggregate this  Value of In-  Aggregate this  Value of In-  Val	-Kind Contributions
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contribution)  First Name    Middle Name	st itemized page) ontributions totaling more than \$100 from any contributor during intribution Received For: Pary Election General Election  If (Local Elections Only)  If Contribution  Aggregate this  In-Kind Contribution  Value of In-In-In-In-In-In-In-In-In-In-In-In-In-I	-Kind Contributions
First Name  Last Name/Organization Name  Address  City  State  Zip Code  Description of In-Kind Com  Prima  Runof  City  State  Zip Code  Description of In-Kind  City  Middle Name  In-Kind Cont  In-	Aggregate this  In-Kind Contribution  Aggregate Election  Aggregate Election  Aggregate In-Kind Contribution  Aggregate Election  Value of In-Kind Contribution  Value of In-Kind Election  Value of In-Kind Election  Value of In-Kind Election	-Kind Contributions
Last Name/Organization Name  Address  Date of In-Kind  City  State Zip Code  Description of In  Cocupation  Employer  First Name  Middle Name  In-Kind Contri	ary Election	s Election
Last Name/Organization Name  Address  Date of In-Kind  City  State Zip Code  Description of In  Occupation  Employer  First Name  Middle Name  In-Kind Contri	If (Local Elections Only)  d Contribution  Aggregate this  In-Kind Contribution  tribution Received For: ry Election  Value of In-Fine Contribution	
Address Date of In-Kind  City State Zip Code Description of In  Occupation Employer  First Name Middle Name In-Kind Contri	d Contribution  Aggregate this  In-Kind Contribution  tribution Received For:  ry Election  Value of In-In-In-In-In-In-In-In-In-In-In-In-In-I	
Occupation Employer First Name Middle Name In-Kind Control	tribution Received For:  ry Election	Kind Contributio
First Name Middle Name In-Kind Control	ry Election General Election	Kind Contributio
Milder Halle Miller and Confe	ry Election General Election	Kind Contribution
Milder Halle Miller and Confe	ry Election General Election	Kind Contributio
i i	ry Election General Election	rana Continuatio
Last Name/Organization Name	if (Local Elections Only)	
Address Date of In-Kind of	Contribution Aggregate this	Election
City State Zip Code Description of In	n-Kind Contribution	<u> </u>
Occupation Employer		
First Name Middle Name In-Kind Contr.	ribution Received For: Value of In-K	Gind Contribution
Last Name/Organization Name	y Election General Election	
	(Local Elections Only)	
Address Date of In-Kind C	Contribution Aggregate this	Election
City State Zip Code Description of In-	-Kind Contribution	
Occupation Employer		
First Name Middle Name In-Kind Contril	ibution Received For: Value of In-Ki	ind Contribution
Last Name/Organization Name	y Election General Election	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Local Elections Only)	
Address Date of In-Kind Co	Contribution Aggregate this E	Election
City State Zip Code Description of In-	Kind Contribution	4
Occupation Employer		
irst Name Middle Name In-Kind Contrit	bution Received For: Value of In-Kir	nd Contribution
ast Name/Organization Name	Election General Election	
☐ Runoff (	(Local Elections Only)	
ddress Date of In-Kind Co	ontribution Aggregate this Ele	ection
ity State Zip Code Description of In-K	Kind Contribution	
ccupation Employer		
. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS		
(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)		
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### ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	v 1	//			RING THE PERIOD
1. NAME OF CANDIDATE OR COMMITTEE	PAYL	and		FR9M: 6-18	18-30-18
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	URES FROM	A PRECEDING PA	GE (enter \$0 if first itemized pa	age)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITEMIZ	ED EXPENDITURE	(expenditures totaling more than \$10)	0 to any payee during the p	eriod)
First Name	Middle Name	2	Purpose of Expenditure	, /	Amount of Expenditure
Last Name Business Name Wilson County	Gover	ment	Mail La	bel	119630
Address East Main	ST-			,	1,40
City Lokohon	State /M	3°9981			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
tast Name/Business Name/ Prin	iting		Printing Mail Out	-	\$1,00401
Address 1331 W Mair	State	Zin Cado	- Mair Our	,	
LepaNon	In	Zip Code 31051			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name, Sign Address 229 W. Forses T		Signs		184 06	
				707	
LEBRNOW	State	Zip Code 31081			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address		<del>-</del>			
City	State Z	ip Code			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
.ast Name/Business Name			-		
Address					
City	State Z	ip Code			i
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
oddress					j
ity	State Zi	p Code			
<ol> <li>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     </li> </ol>				9	1,28435