CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

· W	il Si	ΝĖ	CL.	itti	NTY

1. DATE OF REPORT	2.a. NAME OF C	ANDIDATE OR COMMITT	EF .	ELECTION COM	IMISSION
4-5-18		Campaign	/	or tector	- Trus
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION I	DATE SAC	ni Ga
AL L. Porteo	IT		Aus	DATE DATE	
4.a. CAMPAIGN ADDRESS AND PHONE)			,	
Street or Rural Route 424 W) Mach St.	City	State	Zip Code	Phone	AN TOTAL SA
4.b. CANDIDATE'S HOME ADDRESS (if different	then 10)	en TN	37087	615-973.	-3782
Street or Rural Route	City	State	Zip Code	Phone	
5. OFFICE SOUGHT (include district number, if	annlicable)	6. NAME OF POLIT	ICAL TREASURER (ma	ny ha pondidoto)	
Wilson County Trus	1	1 4	e Pertee		:
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRI	E- MID-YEAF	R YEAR-EN	_
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING DATE OF			
2.26-18		3-3	1-18		
9. (Check one)					
a. This campaign is exempt from detailed tures total \$1,000 or less for this repor	l disclosure becaus ting period. (Comp	e contributions (including lete items 12d., 12e. and	in-kind) received total (! 12f.)	\$1,000 or less AND e	expendi-
 This campaign is required to file a deta and/or expenditures total more than \$1 	iled financial disclo	sure because contribution			
10. I/we do solemnly swear or affirm that the information accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we subenefit of the gandidate or for any other nonpositions. Signature of candidate	is and expenditures wear or affirm that i	required to be reported no campaign contribution defined by the federal in	by the candidate comm is have been expended	ittee by the Campaig for the personal fina) ~	gn ncial
11. WITNESS SIGNATURE			7)		
Carda Pola	4-5-18	Alt	Naster 2	4-5-	2018
signature of witness	date		ignature of witness	d	ate
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT			s	- Daniel	
b. TOTAL RECEIPTS THIS PERIOD		Campai	ms <u>6-20</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD		_	- ca = 2	88,	
d. BAŁANCE ON HAND (12.a. plus 12.b. min	us 12.c.)			\$ 916,60	7
e. TOTAL LOANS OUTSTANDING				s\500.00	>
f. TOTAL OBLIGATIONS OUTSTANDING	······			\$ <u> </u>	<u> </u>

ITEMIZED STATEMENT OF LOANS - CANDIDATE ECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTE Electron Campaign	E	Α.	Car	to for	-Ta		FR	OM;		RING THE PERIOD TO:	
3. COMPLETE THE APPROPRIATE ITEMS	FOR EACH	TEMIZ	ZED LOAN	(loans totaling	more than	\$100 from an	V SOURCE	2 - 2	6-18	3-31-18	
Complete the Following for the Source of the Loa		epiloteographia	A en a Serge gangan en aktivis	garana en frikki piana ar en	inistration in		, 500.00	during the	oeriou)	alegada (1977) eradea araseta et metalescolor	
First Name Middle Name			Outstanding Loan Balance Loans (Beginning of Period) Received				Loan Payments		Outs	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name Cottle 32.				4500					\$1500.00		
Address + 24 W Main St.			i	Received For: Date of Loan Primary Election December 2 General Election							
City Lebonson State	Zip Code	\$ 7	_	Runoff (Local Elections Only) 2 - 2 6 - 18				0-18.			
	orsers or Guar	rantors fo	or Above Lo	an (If more spa	ice is nee	eded please	attach a	a page)			
First Name	Middle Nam	ie		First Name					Middle i	Vame	
Last Name/Organization Name				Last Name/Org	anization	Name			<u> </u>		
Address				Address		"					
City	State Zip Code City					State	Zip Code				
Amount Guaranteed Outstanding				Amount Guaranteed Cutstanding							
First Name	ame Middle Name			First Name Middle Name						ame	
Last Name/Organization Name				Last Name/Organization Name							
Address				Address						· · · · · · · · · · · · · · · · · · ·	
City	ly State Zip Code			City State Zip Code						Zip Code	
Amount Guaranteed Outstanding				Amount Guarant	eed Outsta	anding					
First Name	Middle Name	and the second		First Name Middle Name						ame	
Last Name/Organization Name				Last Name/Orga	nization N	ame			***************************************		
Address		*		Address							
City	State	Zip Code	,	City				State	Zip Code		
Amount Guaranteed Outstanding	<u> </u>	<u> </u>		Amount Guarante	ed Outsta	ınding		<u>_</u>			
st Name Middle Name			First Name Middle Name						ne		
asl Name/Organization Name			L	Last Name/Organization Name							
Address		····	<i>-</i>	Address	···						
City	State	Zip Code	(City State Zip Code					Zip Code		
mount Guaranteed Outstanding			A	mount Guarantee	ed Outstan	nding		1_			
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.)			C	Outstanding Loan Balance Loans Loan (Beginning of Period) Received Payment							
Total outstanding loan balance should also be shown in item. SS-1132 (Rev. 4/02)	12.e. on front pag	je.)		1500	. DD				<u> </u>	1500.00	