

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT MISSION

For State and Local Candidates
For Single-Candidate Committees

| | g-o daniala | and administrate | -60 | | | |
|---|--|--|---------------------------|--------------------------|--|--|
| 1. DATE OF REPORT | 2.a. NAME OF CANDIDA | TE-OR COMMITTEE | | | | |
| 6-25-19 | Donja | Kabin | 500 | | | |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE | | | 3. ELECTION DATE | ,) | | |
| Jonya Kobins | 010 | | 8-7- | 14 | | |
| 4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route | City | State | 7in Code | | | |
| Description VEST | - 127/ | State | Zip Code | Phone | | |
| 4.b. CANDIDATE'S HOME ADDRESS (if different ti | han 4 a) | 167 111 | D1166 | 1004-877F | | |
| 0 | City | State | Zip Code | Phone | | |
| 5. OFFICE SOUGHT (include district number, if a | pplicable) 6. N | NAME OF POLITICAL | REASURER (may be ca | andidate) | | |
| Commissioner Dist | nd 13 | Some | Robin | LAN | | |
| 7. CATEGORY OR REPORT (Check one) | | The state of the s | | | | |
| FIRST SECOND THIRD | FOURTH PRE | - PRE- | MID-YEAR | VEADEND | | |
| QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD | QUARTER PRIMA | RY GENERAL | SUPPLEMENTAL | YEAR-END SUPPLEMENTAL | | |
| | 8.b. E | NDING DATE OF REPOR | | | | |
| 9. (Check one) | | 6-30 | -14 | | | |
| **CODE ***CODE CODE CODE CODE CODE CODE CODE CODE | | | | | | |
| a. This campaign is exempt from detailed disclosure 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 detail. | ed financial disclosure be | cause contributions (inc | cluding in-kind) received | total more than \$1 000 | | |
| and/or expenditures total more than \$1,0 | 000 for this reporting perio | od. | and an initial received | total more than \$1,000 | | |
| 10. I/we do solemnly swear or affirm that the infor accurate accounting of campaign contributions Financial Disclosure Act. Additionally, I/we swebenefit of the candidate or for any other nonpolesis of the candidate | and expenditures require ear or affirm that no came | ad to be reported by the paign contributions have by the federal internal in the contribution of the contributions have been supported by the federal internal in the contribution of the | candidate committee by | the Comment | | |
| 11. WITNESS SIGNATURE | | | | | | |
| Signature of witness | 7/1/14 date | signatu | Jorn les re of witness | 7/1/14 date | | |
| 12. SUMMARY | | | 0 | | | |
| a. BALANCE ON HAND LAST REPORT | | | | | | |
| b. TOTAL RECEIPTS THIS PERIOD | | | 1,356,92 | } | | |
| c. TOTAL DISBURSEMENTS THIS PERIOD | | | 1,356,91 | - | | |
| d. BALANCE ON HAND (12.a. plus 12.b. minus | s 12.c.) | | \$ | | | |
| e. TOTAL LOANS OUTSTANDING | | | \$ | 0 | | |
| f. TOTAL OBLIGATIONS OUTSTANDING | | | \$ — | 0_ | | |

JUL 9 - 2014 1:3

SUMMARY PAGE - CANDIDATE

WILSON COUNTY ELECTION COMMISSION

| 12 NAME OF CANDIDATE OF CONTINUES IN THE | | ELECTION COMMISS | | | | |
|---|-----------------------|-------------------|--|--|--|--|
| 13. NAME OF CANDIDATE OR COMMITTEE (In Full) | 14. REPORT CO | VERING THE PERIOD | | | | |
| RECEIPTS KObinson | FROM: 6-12 | TO:6-30-14 | | | | |
| 15. CONTRIBUTIONS (other than loans and interest) | | | | | | |
| 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.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.c | g., printing, postage | , gasoline) | | | | |
| Fremier Signa Trophy \$1,206 | 5.772 | | | | | |
| Punch Promotions \$ 150.2 | 79 | | | | | |
| \$ | | | | | | |
| \$ | | | | | | |
| \$ | | | | | | |
| \$ | | | | | | |
| \$ | _ | | | | | |
| \$ | | | | | | |
| \$ | _ | | | | | |
| | | | | | | |
| Total of Expenditures (\$100 or less each payee) | | | | | | |
| b. Itemized Expenditures (Over \$100 each payee this period) | 4 13 0 10 i | | | | | |
| c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) | | | | | | |
| 20. LOAN REPAYMENTS MADE THIS PERIOD | | \$ | | | | |
| 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) | | \$1,356,94 | | | | |
| 22.IN-KIND CONTRIBUTIONS | | | | | | |
| a. Unitemized in-kind contributions (\$100 or less from each source this period)\$ | | | | | | |
| b. Itemized in-kind contributions (over \$100 from each source this period)\$ | | | | | | |
| c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$ | | | | | | |
| 23. OBLIGATIONS | | | | | | |
| a. Unitemized Obligations Outstanding (\$100 or less each)\$ | | | | | | |
| b. Itemized Obligations Outstanding (Over \$100 each) | | | | | | |
| c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$ | | | | | | |



ITEMIZED STATEMENT OF EXPENDITURES

| T4 1111E 05 01 115 15 15 05 00 11 11 15 15 15 15 15 15 15 15 15 15 15 | | | | | | | |
|---|-------------|---------------------|----------------------------|-------------------------|-----------------------|--|--|
| 1. NAME OF CANDIDATE OR COMMITTEE | | | 2. REPORT COVE | RING THE PERIOD | | | |
| Donia Kabinson FROM: 4-1 | | | 10:6-30-14 | | | | |
| TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | | | Amount | | |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period) | | | | | | | |
| First Name | Middle N | ame | Purpose of Expenditure | | Amount of Expenditure | | |
| Least Name / Duninger Name | | | - Sims 1 | stakes | • | | |
| Last Name/Business Name Least Name/Business Name Local Sign & Trophy | | 012112 | J. Carles | | | | |
| Address | | Of Card | 4 | | | | |
| 1018 M Crart | <u> </u> | 10 | | J | 1 | | |
| City | State | Zip Code 37090 | | | DC 175 18 | | |
| - Jan Jan Coll | 111 | | Call and Adding a Stollage | | 11,000,10 | | |
| First Name | Middle Na | me | Purpose of Expenditure | , | Amount of Expenditure | | |
| Lest Name/Business Name | | 7 . | Politica | | | | |
| Punch Promotional troducts | | 1 | | | | | |
| Address | - 1 | | 200112 | | 7 | | |
| 13008 Lebano | State | Zip Code | - | | , | | |
| | State | 100,00 | | | 1815000 | | |
| IIII Janet | 1 4 1 | 191199 | | | 120.00 | | |
| First Name | Middle Na | me | Purpose of Expenditure | | Amount of Expenditure | | |
| Last Name/Business Name | | | | | | | |
| | | | ¥! | | | | |
| Address | | | | | | | |
| City | State | Zip Code | | | | | |
| on, | Otato | Zip code | | | | | |
| First Name | Middle Nan | ne | Purpose of Expenditure | | Amount of Expenditure | | |
| | | | | - Annual of Experience | | | |
| Last Name/Business Name | | | | | | | |
| Address | | | | | | | |
| Cit. | | 7.01 | | | | | |
| City | State | Zip Code | | | | | |
| | S. Charles | | | | | | |
| First Name | Middle Nam | е | Purpose of Expenditure | | Amount of Expenditure | | |
| Last Name/Business Name | | | | | | | |
| | | | | | | | |
| Address | | | | | | | |
| City | State | Zip Code | | | | | |
| * | Cidio | 2.9 0000 | | | | | |
| First Name | Middle Nam | | Purpose of Expenditure | | Amount of Expenditure | | |
| WINDERNATIVE | | | | 7 thount of Exponditure | | | |
| ast Name/Business Name | | | | | | | |
| Address | | | | | | | |
| City | State | Zip Code | | | | | |
| | | | | | | | |
| 5. 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 | | | | Z | 1,356.94 | | |