CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

		or State and r Single-Ca				JUL	0 2010
	DATE OF REPORT	2.a. NAME OF C			:ees		9 2018
	: uly 1, 2018	Justin				ILECTION	N COUNTY COMMISSIO
2.b. I	IF COMMITTEE, NAME OF CANDIDATE	V V(-2111	1 1111		3. ELECTION D	DATE	COMMISSIO
					20	- · · · · -	
	CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		0.1.			<u>*</u>
5	140 Quarry Rd. N	nount Juli	· 4	State	Zip Code	Phone	
4.b. C	ANDIDATE'S HOME ADDRESS (if different	100/107 0000 i than 4.a.)	<u>el</u>	110.	<u>37122</u>	615-51	7-0794
St	treet or Rural Route	City		State	Zip Code	Phone	!
5. OI	PFFICE SOUGHT (include district number, if	caplicable)	1	CE COLITION	· · • · · · · ·		W
$\Gamma_{\mathcal{C}}$	ounty Commissioner 1	D-2,5	6. NAME	of political Fin Smi	TREASURER (ma	y be candidate)	ļ
7. C/	ATEGORY OR REPORT (Check one)	ワータン	1 200	in omi	ith		
	FIRST SECOND THIRD	FOURTH	D PRE-			[
QI	DUARTER QUARTER QUARTER	QUARTER	PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENT		R-END EMENTAL
0.a. DL	EGINNING DATE OF REPORTING PERIOD 4-2-18	^ _		DATE OF REPO	PRTING PERIOD		
9. (Che	eck one)		Ψ	-30-18	3		
b. 10. I/v ac Fit	This campaign is exempt from detailed tures total \$1,000 or less for this reportion. This campaign is required to file a detain and/or expenditures total more than \$1, we do solemnly swear or affirm that the info ccurate accounting of campaign contributions inancial Disclosure Act. Additionally, I/we swenefit of the candidate or for any other nonpositional process.	prince (Complete in the prince	in this campaign	ign financial disc e reported by the contributions have federal internal i	closure report is true candidate commit	ceived total more	e than \$1,000
11. W	TNESS SIGNATURE Lita Signature of witness	7-1-18 date	£	elala signatu	ure of witness	_ 1,	
12. SUN	MARY						
a.	BALANCE ON HAND LAST REPORT			(sO		
b.	TOTAL RECEIPTS THIS PERIOD		***************************************	\$	4,725.6	<u> </u>	
C.	TOTAL DISBURSEMENTS THIS PERIOD			\$	3,282.7	0	
	BALANCE ON HAND (12.a. plus 12.b. minu				-	· \$ 1,442.	30_
е.	TOTAL LOANS OUTSTANDING					sO_	
f,	TOTAL OBLIGATIONS OUTSTANDING		•••••••••••••••••••••••••••••••••••••••			s O	



SUMMARY PAGE - CANDIDATE

WILSON COUNTY

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	FLECTION COMMISSION
Justin Smith County Comm. D-25	14. REPORT COVERING THE PERIO
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	FROM: 4-1-18 TO:6-30-18
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 275.00
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	7.7.45.00
17. INTEREST RECEIVED THIS REPORTING PERIOD	
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	
DISBURSEMENTS	\$ 4,725,00
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category -	
S 370	<u>0</u>
Southeastern Imp. 5 52.4	'
Big Brother Check # 0102 \$ 100.0	<u> </u>
1St Fence post \$ 61.0	3
*	
\$	
\$	
\$	- The state of the
\$	
Total of Expenditures (\$100 or less each payee)	
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 3.044.23
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 0
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	
22.IN-KIND CONTRIBUTIONS	2/4/04/1
a. Unitemized in-kind contributions (\$100 or less from each source this period)	s ()
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)	• 0
b. Itemized Obligations Outstanding (Over \$100 each)	
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	
- The and 20.0.) (must be shown Hem	14.1.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATEMISSIONE

1. NAME OF CANDIDATE OR COMMITTE Justin Smith	EE O . A .	7	2. REPORT COV	ERING THE PERIOD
	County comm.		FROM: 4-1-18	TO: 6-30, 18
TOTAL ITEMIZED CAMPAIGN CONTR COMPLETE THE APPROPRIATE ITEMS FOR	BUTIONS FROM PRECEDING F	PAGE (enter \$0 if first itemized p	age)	1 8
4. COMPLETE THE APPROPRIATE ITEMS FO	Middle Name	V (contributions totaling more than s Contribution Received For:	100 from any contribu	and the control of th
Last Name/Organization Name			/	Amount of Contribution
Hemyari		Primary Election	General Election	\$500.00
Address 4465 S. Caroth	ers Rd.	Runoff (Local Election	s Only)	1 900.00
Franklin	State Zip Code 37064	Date of Contribution		Aggregate This Election
Occupation Self-Trainer	-	7 4-2-18		
Employer				
First Name Michael -	Middle Name	Contribution Received For:		Amount of Contribution
Last Name (Organization Name	<u></u>	Primary Election	General Election	
Address P.O. Box 1299		Runoff (Local Elections	Only)	\$750.00
City Lebanon	State Zip Code 37 08 7	Date of Contribution		Aggregate This Election
Occupation Sail	1 114 91081	4-2-18		
Employer		J 4-2-10		
First Name D	Middle Name	Contribution Received For:		Amount of Court is
Last Name/Organization Name			Seneral Election	Amount of Contribution
Address O O O				\$1,500.00
P.O. BOX 1477		Runoff (Local Elections (Only)	
occupation Twist	State Zip Code 37122	Date of Contribution		Aggregate This Election
Retired		4-25-18		
mployer		100 10	'	
irst Name	Middle Name	Contribution Received For:		Amount of Contribution
ast Name/Organization Name		Primary Election G	eneral Election	# 200 00
odress 104 Saratoga Blud		Runoff (Local Elections Or	niy)	\$200.00
Hendersonville	State 70. Zip Code 37075	Date of Contribution		Aggregate This Election
cupation Pilot		5/2/18		
Southwest Airlin	YES	210/10		
TOTAL ITEMIZED CONTRIBUTIONS				
(Carry forward to item 3, of next page if additional pages of (If this is the last page of contributions, this amount must	of this form are used.) be shown in item 15b. of summary.)		\$	2,950.00
3			<u> </u>	

JUL 9 2018

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATENTY

THE NAME OF CANDIDATE OF COA	AFAITTEE		LECTION COMMISSION
1. NAME OF CANDIDATE OR CON Justin Smith		2. REPORT CC	VERING THE PERIOD
			Amount
	ONTRIBUTIONS FROM PRECEDING I	PAGE (enter \$0 if first itemized page) N (contributions totaling more than \$100 from any contrib	1\$2,950,00
First Name M 11	Middle Name	Contribution Received For:	Amount of Contribution
Last Name Organization Name		Primary Election General Election	Amount of Community
Wilson		General Election	\$200.00
Address P.O. BOX 1728		Runoff (Local Elections Only)	
City Mt. Juliet	State V. Zip Code 37122	Date of Contribution	Aggregate This Election
Occupation Self - Wice	rcker	5-10-18	
Employer			
First Name Tom	Middle Name	Contribution Received For:	Amount of Contribution
Last Name Organization Name Earl		Primary Election General Election	\$ 500.00
Address P.O. Box 1262		Runoff (Local Elections Only)	
Decatur	State Zip Code TX. 76234	Date of Contribution	Aggregate This Election
Construction		5-18-18	
Employer			
First Name Tom	Middle Name	Contribution Received For:	Amount of Contribution
Last Name Organization Name Murphy	<u></u>	Primary Election General Election	\$300.00
Address	ester	Runoff (Local Elections Only)	14 300.00
Address 20011 Douch	oster State TN, 37090	Runoff (Local Elections Only) Date of Contribution	Aggregate This Election
Address 20011 Douch	State Zip Code 37090	Date of Contribution	
Address 20011 Douch	State Zip Code 37090	<u> </u>	
Address 20011 Douch	State Zip Code 37090	Date of Contribution	
Address 20011 Douche City Lebarron Docupation Self - Insurar inst Name John ast Name/Organization Name	State 7, Zip Code 37090	Date of Contribution	Aggregate This Election Amount of Contribution
Address 2001 Douche City Leburron Docupation Self - Insurar Inst Name John ast Name/Organization Name Thompson	State 7, Zip Code 37090	Date of Contribution G - - S Contribution Received For: Primary Election General Election	Aggregate This Election Amount of Contribution
Address 2001 Douche City Lebarron Docupation Self - Insurar Instrume John ast Name/Organization Name Thompson ddress 464 Locast Gr	State 7 Zip Code 37090 YG2 Middle Name	Date of Contribution 6 - - 8 Contribution Received For:	Aggregate This Election
Address 2001 Douche City Lebaman Docupation Self-Tinsurar Instrume John ast Name/Organization Name Thompson ddress 464 Locast Gr fly Watertown	State 77N, Zip Code 37090	Date of Contribution G - - S Contribution Received For: Primary Election General Election	Aggregate This Election Amount of Contribution
Address 2001 Douche City Lebaman Decupation Self-Trisurar Instrume John ast Name/Organization Name Thompson ddress 464 Locast Gr ity Watertown Decupation Project May	State 7. Zip Code 37090 Vice Middle Name State 7. Zip Code 37184	Date of Contribution G - - S Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Date of Contribution	Aggregate This Election Amount of Contribution
Address 2001 Douche City Lebaman Docupation Self - Insurar Instrume John ast Name/Organization Name Thompson ddress 464 Locast Gr Try Watertown Docupation Project Mai	State 7 Zip Code 37090 YG2 Middle Name	Date of Contribution G - - S Contribution Received For: Primary Election Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution
Address 20011 Doucher Decupation Self-Insurar Instrume John ast Name John ast Name/Organization Name Thompson ddress 464 Locast Gr By Watertown Decupation Project Manager Decupation Project Manager Double Signal Rest TOTAL ITEMIZED CONTRIBUTION	State 7. Zip Code 37090 YOU Middle Name We State 7. Zip Code 37184 Nager oration s	Date of Contribution G - - S Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Date of Contribution	Aggregate This Election Amount of Contribution \$500.00 Aggregate This Election
Address 20011 Douche City Lebarman City Self-Trisurar City Same John City Locast Grant City Watertown C	State N. Zip Code 37090 We State N. Zip Code 37184 Nager oration State oration State oration	Date of Contribution G - - S Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Date of Contribution	Aggregate This Election Amount of Contribution

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS WILSON COUNTY

1. NAME OF CANDIDATE C Justin Si	R COMMITTEE	~ <u>+</u>	1. 0000	D-25	2. REPORT COV	ERING THE PERIOD		
1			1		FROM: 4-1-18	TO: 6-30-18		
4. COMPLETE THE APPROPRI	O CONTRIBUTE ATE ITEMS FOR	ONS FRO	OM PRECEDING PAC	GE (enter \$0 if first itemized page	9)	0		
First Name	THE THE MOTORY			RIBUTION (in-kind contributions totaling	entergraphic entre e	ontributor during the period)		
		Middle	Name	In-Kind Contribution Receive Primary Election		Value of In-Kind Contribution		
Last Name/Organization Name				Runoff (Local Election				
Address	• • • • • • • • • • • • • • • • • • • •			Date of In-Kind Contribution		Aggregate this Election		
City		State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer	<u> </u>						
First Name		Middle N	làme	In-Kind Contribution Received	For:	Value of In-Kind Contributio		
Last Name/Organization Name				Primary Election	General Election			
Address				Runoff (Local Election	s Only)			
				Date of In-Kind Contribution		Aggregate this Election		
City		State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer							
First Name		Middle Na	ame	In-Kind Contribution Received Primary Election		Value of In-Kind Contribution		
ast Name/Organization Name				Runoff (Local Elections	General Election			
Address				Date of In-Kind Contribution	Olay)	Aggregate this Election		
Dity		State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer							
irst Name		Middle Na	me	In-Kind Contribution Received F		Value of In-Kind Contribution		
ast Name/Organization Name		<u> </u>			General Election			
ddress		······································		Runoff (Local Elections Date of In-Kind Contribution	Only)	A		
ity		State	Zip Code			Aggregate this Election		
ccupation	Employer	Cide	Lip Gode	Description of In-Kind Contribution				
	Linployer							
st Name		Middle Nam	en e	In-Kind Contribution Received I		Value of In-Kind Contribution		
t Name/Organization Name				1	Seneral Election	i		
dress				Date of In-Kind Contribution		Aggregate this Election		
7		State	Zip Code	Description of In-Kind Contribution				
cupation	Employer							
		Signativa supe			Mit the beautiful to the second secon			
TOTAL ITEMIZED IN-KIND C (Carry forward to item 3, of next page it (If this is the last page of in-kind contrib	f additional pages of	this form are	e used.)					
SS-1128 (Rev. 2/06)	and dirigally		in non-220. Of Summary	-)				

JUL 9 2018

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATES

1 NAME OF CAMPIDATE OF OR	4. MANC OF CAMPINATE OF COMPUTER					2. REPORT COVERING THE PERIOD				
1. NAME OF CANDIDATE OR CO	MMITEE	Comm.	D-15							
COMPLETE THE APPROPRIATION (obligations totaling person/vendor at the end of the control of	TE ITEMS FOR EAC ng more than \$100 o	CH ITEMIZED	Outstanding Balance (Beginning of Period)	FROM: 4-1-1 Debt Incurred This Period	Payments This Period	0-30-18 Outstanding Balance (End of Period)				
First Name	Middle N	lame				entring berodelika bida dalam pelapatan enterbalah				
Last Name/Business Name										
Address		<u></u>	\dashv $ \bigcirc $	0	0	0				
City	State	Zip Code								
Description of Obligation										
First Name	Middle N	ame			person degeneral and the second secon					
Last Name/Business Name										
Address										
City	State	Zip Code								
Description of Obligation										
First Name	Middle Na	me		***		7.00 to Maria				
Last Name/Business Name										
Address										
City	State	Zip Code								
Description of Obligation										
Flist Name	Middle Nar	me	The second secon			WANTED TO THE TOTAL PROPERTY OF THE TOTAL PR				
ast Name/Business Name			_							
Address			_							
City	State	Zip Code								
Description of Obligation										
Trst Name										
ast Name/Business Name	Middle Nan	ne	_							
ddress										
		F								
City Description of Obligation	State	Zip Code								
				NAME OF THE OWNER, WAS ASSESSED.						
. TOTALS (Total from Outstanding Balance - (End of in item 23b. on summary page.)	f Period) column must	also be shown	0	0	0	0				

SS-1127 (Rev. 4/02)

Page <u>\$</u> of <u>**9**</u>

JUL 9 2018

ITEMIZED STATEMENT OF LOANS - CANDIDATE SON COUNTY

4 NAME OF CANDIDATE OF										***************************************	CTION COMMI
NAME OF CANDIDATE OF	COMMITTEE			^				F-5-4			IG THE PERIOD
JUSTIN ?	SMITH RIATE ITEMS	COL FOR FACE	LITEMIZ)m m . (loans totaling r				1-1-18		o: 6-30-18
Complete the Following for the So	s postojų sigilaries daliodas (Lodge).	termination of the termination of			(toalis totality)	note (nai)	o too noni any	source o	uring the period)) 	
First Name	Middle Na			Outstanding	Loan Balance	Lo	ans	Loa	ın T	Outstan	ding Loan Balance
Last Name/Organization Name				(Beginnini	g of Period)	Rec	eived	Paym	ents		nd of Period)
cast NamerOrganization Name				(\supset))		0
Address		***************************************		Loan Recei	ved For:				Date of Loan		
City	State	Zip Code		Prima	ry Efection	☐ Gen	eral Election				
	111115			L	(Local Elections (·		
First Name	List All Endo	rsers or Gua Middle Nam		or Above Lo	an (If more space	ce is nee	ded please a	ittach a			1944 (884)
		Wilde Wall	it.		First Name				M	iddle Nar	ne
Last Name/Organization Name					Last Name/Org	anization I	Name				
Address					Address	· <u>····</u>			-, w		
City		State	Zip Co	de	City			a	10		7:- 0
					,				51	ate	Zip Code
Amount Guaranteed Outstanding					Amount Guaran	teed Outst	anding				
First Name		Middle Name	е	_ *540 ***	First Name				Mid	ddle Nam	e
Last Name/Organization Name		1			Last Name/Orga	nization N	ame		<u> </u>		
Address					Address						
City		State	Zip Cod	le	City				Sta	te	Zip Code
Amount Guaranteed Outstanding					Amount Guarante	ed Outsta	nding				
First Name		Middle Name	(0.07)	500,000,000	First Name			***************************************	Mic	ddle Nam	e
ast Name/Organization Name					Last Name/Orgar	nization Na	ime			.	
Address						··			***		
					Address						
City		State	Zip Code	3	City				Sta	te	Zip Code
mount Guaranteed Outstanding			L		Amount Guarante	ed Outstar	nding			····	<u> </u>
irst Name	t teste e tage d'Adde que de te	Middle Name		30 10 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	First Name		1000		Mido	de Name	-26000000000000000000000000000000000000
est Name/Organization Name					ast Name/Organi	ization Na	ma				
					- ust Home/Organi	ZUUUH NGI	ric				
ddress				7	Address						
ity		State	Zip Code	(City		···		State		Zip Code
nount Guaranteed Outstanding			*	- A	mount Guarantee	d Outstan	ding				
Totals for all Loans (complete or Total loans received should also be show	n in item 16, on sur	nmary page.)	is)		Outstanding Loan (Beginning of Pe		Loans Received		Loan Payments		tanding Loan Balance (End of Period)
Total loan payments should also be show fotal outstanding loan balance should also	n in item 20. on sur be shown in item 1	mmary page.) 2.e. on fron! pa	ige.)	Ī	0		\bigcirc		\bigcirc	1	\bigcirc
SS-1132 (Rev. 4/02)				<u> </u>		P	age	(of	7		RDA 1159

WILSON COUNTY

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE OF

1 NAME OF CANDIDATE OR COM			VERING THE PERIOD
Justin Smith		nm. D-25 FROM: 4-1-1	8 TO: 6-30-18
	XPENDITURES FROM PRECEDING		
	tis the term of the Control of the term of	IRE (expenditures totaling more than \$100 to any payee during the	e period)
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Signs	Now		
Address		- Alace	عوسے ارارسو بن
City	Maple St. State Zip Code	Signs	\$544.50
Lebano	on Th 37087		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name	Ravia		
Address R4 M	, ,		and process of the second
	Lebanon Rd. State Zip Code	Political Cards	は251-55
M+. Jul	-F ****		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Signs Signs	On The Cheap		
Online	Order	Political Signs	8416.91
City	State Zip Code	<u> </u>	
irst Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name		-	77110011(3)
Home Home	Depot		
ddress 955 S	3. Hartman St.	Sign Material	B 158.31
ity	State Zip Code		
Lebanon	TO 37087		
irst Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name Home	Depot	7	
ddress	1	Paint Sign Materia	1 4 170 01
/12 ⁻ 2	` • • ·		11 B Fre Care.
955 5	State Zip Code	taint 1 Sign Nateria	1 6 113 76
1. debanen	State Zip Code	Taint 1 Sign Wateria	(6 113 70
	State Zip Code	Purpose of Expenditure	Amount of Expenditure
Irst Name st Name/Business Name	State Zip Code To 37087 Middle Name		
rst Name st Name/Business Name Rey L	State Zip Code To 37087 Middle Name	Purpose of Expenditure	Amount of Expenditure
Ist Name st Name/Business Name Revi L Idress On Lin	State Zip Code Th 37087 Middle Name - OCCA Marketing	Purpose of Expenditure	
rst Name st Name/Business Name Rey L	State Zip Code To 37087 Middle Name		Amount of Expenditure
Ist Name st Name/Business Name Revi L Idress On Lin	State Zip Code The 37087 Middle Name - Mark Code State Zip Code	Purpose of Expenditure	Amount of Expenditure

WILSON COUNTY

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATESION

1. NAME OF CANDIDATE OR COMMITTEE	A-2	nty Com	n D-25	2. REPORT COVER	RING THE PERIOD TO: U - 30 - 18
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT					b2.244-23
4. COMPLETE THE APPROPRIATE ITEMS FOR First Name	Middle N	ntalise geranna strantas neses se esta desta se es	Purpose of Expenditure	I to any payee during the pe	Amount of Expenditure
Last Name Business Name Capital	Promi	ptions	_		
Address	Inder State	Zip Code	Signs		\$800.00
First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		***************************************			
Address				·	
City	State	Zip Code			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name:Business Name			1		
Address					
City	State	Zip Code			
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	1	 			
Address					
City	State	Zip Code			
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name	•	,, ,			
4ddress		,			
City	State	Zip Code	م		
First Name	Middle Nam	е	Purpose of Expenditure	,	Amount of Expenditure
ast Name/Business Name					
ddress					
Sity	State	Z:p 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					15 3,044.23