CAMPAIGN FII					7
	For State ar for Single-Ca				MISON COLUND
. DATE OF REPORT	2.a. NAME OF				-4 47
07/30/2020	Jonathan		COMMITTEE	E/	Ny 302
b. IF COMMITTEE, NAME OF CANDIDAT	E.			3. ELECTION DATE	Crisson Con
N/A				2020	COLUNX
a. CAMPAIGN ADDRESS AND PHONE		· 			100/55/0
Street or Rural Route	City		State	Zip Code	Phone (4)
204 Bryson Pl.	Mt. Juliet		TN	37122	615-347-7815
 b. CANDIDATE'S HOME ADDRESS (if diffe Street or Rural Route 	erent than 4.a.) City		State	Zip Code	Phone
Same as 4.a	,		5.0.0	2.p 0000	1 Hone
OFFICE SOUGHT (include district number	er, if applicable)	6. NAME	OF POLITICA	L TREASURER (may be	candidate)
Wilson County School Board, District 3	,		a Sorvick	(.	, ,
CATEGORY OR REPORT (Check one)					
FIRST SECOND THIR	D FOURTH	X PRE-	PRE-	☐ MID-YEAR	VEADENE
QUARTER QUARTER QUART	ER QUARTER	PRIMARY	GENERAL	. SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
BEGINNING DATE OF REPORTING PERIOD)		GDATE OF REI	PORTING PERIOD	
7/01/2020 (Check one)		07/27/2020			
b. X This campaign is required to file a and/or expenditures total more that	an \$1,000 for this repo	nplete items 12d closure because orting period.	L. 12e. and 12 contributions	f.) (including in-kind) receive	·
b. X This campaign is required to file a and/or expenditures total more that	e information contains and expenditure to the container of the container o	closure because orting period. ed in this campares required to be at no campaign out of the control of the con	contributions aign financial of the reported by contributions he rederal intern	(including in-kind) received including in-kind) received including in-kind) received including in-kind) received including in-kind in-ki	ed total more than \$1,000 and that this report is an by the Campaign
b. X This campaign is required to file a and/or expenditures total more that I/we do solemnly swear or affirm that the accurate accounting of campaign contribering in the candidate or for any other with the can	e information containe outlins and expenditur we swear or affirm that nonpolitical purpose a	closure because orting period. ed in this campares required to be at no campaign out of the control of the con	contributions aign financial of e reported by contributions he federal internal signature	(including in-kind) received including in-kind) received including in-kind) received including in-kind) received including inc	ed total more than \$1,000 and that this report is an by the Campaign
b. This campaign is required to file a and/or expenditures total more that the accurate accounting of campaign contributions of the candidate or for any other signature of candidate. WITNESS SIGNATURE	e information containe outlins and expenditur we swear or affirm that nonpolitical purpose a	closure because orting period. ed in this campares required to be at no campaign out of the control of the con	contributions aign financial of e reported by contributions he federal internal signature	(including in-kind) received disclosure report is true at the candidate committee ave been expended for the all revenue code.	ed total more than \$1,000 and that this report is an by the Campaign
b. X This campaign is required to file a and/or expenditures total more that I/we do solemnly swear or affirm that the accurate accounting of campaign contribe Financial Disclosure Act. Additionally, I/benefit of the candidate or for any other signature of candidate WITNESS SIGNATURE Signature of witness	e information containe outions and expenditur we swear or affirm that nonpolitical purpose a date	closure because orting period. ed in this campares required to be at no campaign of a defined by the	contributions aign financial of the reported by contributions he federal intermodular signature.	(including in-kind) received (including in-ki	ed total more than \$1,000 and that this report is an by the Campaign
b. This campaign is required to file a and/or expenditures total more that the accurate accounting of campaign contribers of the candidate or for any other signature of candidate WITNESS SIGNATURE Signature of witness	detailed financial disc an \$1,000 for this reported information contains and expenditure we swear or affirm that nonpolitical purpose a date	closure because orting period. ed in this campares required to but no campaign of selection of the control of	contributions aign financial of the reported by contributions has federal intermorphisms. Signature	(including in-kind) received fisclosure report is true at the candidate committee ave been expended for the all revenue code. Of political treasurer ature of witness	ed total more than \$1,000 and that this report is an by the Campaign
b. This campaign is required to file a and/or expenditures total more that the accurate accounting of campaign contribers of the candidate or for any other signature of candidate. WITNESS SIGNATURE signature of witness SUMMARY a. BALANCE ON HAND LAST REPORT	e information containe outlions and expenditur we swear or affirm that nonpolitical purpose a date	closure because orting period. ed in this campares required to but no campaign of the campaig	contributions aign financial of the reported by contributions has federal internal signature.	(including in-kind) received fisclosure report is true at the candidate committee ave been expended for the all revenue code. In of political treasurer Instructor witness 1,335.00	ed total more than \$1,000 and that this report is an by the Campaign
b. X This campaign is required to file a and/or expenditures total more that the accurate accounting of campaign contriberation of the candidate or for any other signature of candidate. WITNESS SIGNATURE signature of witness SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD	e information containe outions and expenditur we swear or affirm that nonpolitical purpose a date 7/3/20 date	nplete items 12d closure because orting period. ed in this campaires required to be at no campaign of as defined by the	contributions aign financial of ereported by contributions he federal internal signature	disclosure report is true at the candidate committee ave been expended for the all revenue code. Of political treasurer ature of witness 1,335.00 1,335.00	ed total more than \$1,000 and that this report is an by the Campaign
b. X This campaign is required to file a and/or expenditures total more that the accurate accounting of campaign contribers of the candidate or for any other signature of candidate WITNESS SIGNATURE Signature of witness SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD	e information containe outions and expenditur we swear or affirm that nonpolitical purpose a date 7/3/20 date	closure because orting period. ed in this campaires required to but no campaign of the campai	contributions aign financial of the reported by contributions he federal internormal signature.	(including in-kind) received fisclosure report is true at the candidate committee ave been expended for the all revenue code. Of political treasurer ature of witness 1,335.00 \$ 0 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	and that this report is an by the Campaign he personal financial 7/3/2020 date

RECEIVED

JUL 30 2020

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WILSON COUNTY

ELECTION ROMMISSION

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORTEOVERING THE PERIOD
Jonathan White	FROM: 07/01/2020 TO: 07/27/2020
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>8</u> 35.00
b. Itemized Contributions (over \$100 from each source this period)	\$ 500.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. ar	nd 15.b.)
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u></u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	<u>0</u>
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 ca	itegory - e.g., printing, postage, gasoline)
\$ _	
s	
\$	
s	
\$	
\$	
\$	
Total of Expenditures (\$100 or less each payee)	\$ 0
b. Itemized Expenditures (Over \$100 each payee this period)	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.	
20. LOAN REPAYMENTS MADE THIS PERIOD	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12	
22.IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this perio	od)\$_0
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ 0
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a.	and 22.b.)\$ 0
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 sho	own i item 12 f) \$ 0

JUL 3 0 2020 ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE WILSON COUNTY

NAME OF CANDIDATE OR COMMITTEE Jonathan White		·		ORT COVE RINE THE PERROMISSIO 07/01/2020 TO: 07/27/2020 Amount
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU				\$0
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEM	IZED CONTRIBUTIO	ON (contributions totaling more than \$100 from a	ny contributor)
First Name	Middle Nar	ne	Contribution Received For:	Amount of Contribution
Erika			✓ Deimany Florition ☐ Connection	Classian
Last Name/Organization Name			☐ ☐ Primary Election ☐ General:	Election
Cramton Address	 		Runoff (Local Elections Only)	
806 Hamsburg Ln.			[Nation (Local Elections Only)	\$250.00
City	State	Zip Code	Date of Contribution	Aggregate This Election
Mt, Juliet	TN	37122		
Occupation				
Attorney				
Employer			T. () 100 TO	
Stites & Harbison	Proposition and the second		7/11/2020	\$250.00
First Name	Middle Na.	me	Contribution Received For:	Amount of Contribution
Rob	1	 		50 a Para
Last Name/Organization Name			Primary Election General	Election
Elliott			Runoff (Local Elections Only)	
Address 6141 Chickering Ct.			Runon (Local Elections Only)	\$250.00
City	State	Zip Code	Date of Contribution	Aggregate This Election
Nashville	TN	37215		
Occupation				
President				
Employer				
Stansell Electric			7/19/2020	\$250.00
		Newson State Control of the State St		
First Name	Middle Nan	ne	Contribution Received For:	Amount of Contribution
	Middle Nan	ne		ł .
First Name Last Name/Organization Name	Middle Nan	ne	Contribution Received For: Primary Election General I	ł .
Last Name/Organization Name	Middle Nan	ne	Primary Election General I	ł .
	Middle Nan	ne		ł .
Last Name/Organization Name	Middle Nan	Zip Code	Primary Election General I	ł .
Last Name/Organization Name Address City			Primary Election General I	Election
Last Name/Organization Name Address			Primary Election General I	Election
Last Name/Organization Name Address City Occupation			Primary Election General I	Election
Last Name/Organization Name Address City			Primary Election General I	Election
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election General I General I Runoff (Local Elections Only) Date of Contribution	Aggregate This Election
Last Name/Organization Name Address City Occupation		Zip Code	Primary Election General I	Election
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Eniployer First Name Last Name/Organization Name Address	State Middle Nar	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General E	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Eniployer First Name Last Name/Organization Name	State	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Nar	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General E	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Eniployer First Name Last Name/Organization Name Address	State Middle Nar	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General E	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Nar	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General E	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Nar	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General E	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Eniployer First Name Last Name/Organization Name Address City Occupation Employer	State Middle Nar	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General E	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Nar	Zip Code	Primary Election General I Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General E	Aggregate This Election Amount of Contribution

JUL 30 2020

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

ELECTION COMMISSION 1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVERING THE PERIOD FROM: 07/01/2020 TO: 07/27/2020 Jonathan White 3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) \$0 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period) In-Kind Contribution Received For: First Name Middle Name Value of In-Kind Contribution ☐ Primary Election ☐ General Election Last Name/Organization Name Runoff (Local Elections Only) Address Date of In-Kind Contribution Aggregate this Election City State Zip Code Description of In-Kind Contribution Occupation Employer First Name Middle Name In-Kind Contribution Received For: Value of In-Kind Contribution Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Address Date of In-Kind Contribution Aggregate this Election Zip Code Description of In-Kind Contribution Occupation Employer First Name Middle Name In-Kind Contribution Received For: Value of In-Kind Contribution Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Address Date of In-Kind Contribution Aggregate this Election City State Zip Code Description of In-Kind Contribution Occupation Employer First Name Middle Name In-Kind Contribution Received For: Value of In-Kind Contribution ☐ Primary Election ☐ General Election Last Name/Organization Name Runoff (Local Elections Only) Address Date of In-Kind Contribution Aggregate this Election City State Zip Code Description of In-Kind Contribution Occupation Employer First Name In-Kind Contribution Received For: Middle Name Value of In-Kind Contribution Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Address Date of In-Kind Contribution Aggregate this Election City State Zıp Code Description of In-Kind Contribution Occupation Employer 5. 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.)

JUL 3 0 2020

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATENTY

NAME OF CANDIDATE OR COMMITTEE Jonathan White	RING THE PERIOD TO: 07/27/2020						
3. TOTAL ITEMIZED CAMPAIGN EXPENDITE	Amount \$0						
4. COMPLETE THE APPROPRIATE ITEMS FOR I	EACH ITEM	IZED EXPENDITURE (expenditures totaling more than \$100	to any payee during the pe			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	<u> </u>		-				
Address							
City	Zip Code						
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address			•				
City	State	Zip Code					
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			7				
Address	·						
City	State	Zip Code					
First Name	Middle Nam	e	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name	<u> </u>						
Address		· · · · · · · · · · · · · · · · · · ·					
ty State Zip Code							
First Name	Name Middle Name				Amount of Expenditure		
Last Name/Business Name		, · · · · · · · · · · · · · · · · · · ·					
Address	• • • • • • • • • • • • • • • • • • • •		.				
City	State	Zip Code					
First Name	Middle Name	3	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
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					SO		

JUL 30 2020

ITEMIZED STATEMENT OF LOANS - CANDIDATESON COUNTY

1. NAME OF CANDIDATE OR COMMITTEE								2.	REPORT (cover	Rig	THE FERINGS SIC
1						FROM: TO:						
Jonathan White 07/01/2020 07/27/2020							27/2020					
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)												
Complete the Following for the Source	of the Loan											
First Name Middle Name Outstanding I						Loans			oan	Outstanding Loan Balance		
Jonathan (Beginning of Period) Received Payments (End of Period)								of Period)				
Last Name/Organization Name \$7,661.65 \$0 \$0 \$7,661.65									65			
While											.0.7	
Address Loan Receiving 204 Bryson Pl. 152 Disease					5/13/2020 \$2.743.75							
	State	Primary Election										
City Mt. Juliet	TN	Zip Code 37122		☐ Runoff (Local Elections	Only)			6/12/2020 6/30/2020		\$2,000.00 \$2,094.78	
		sers or Guara	otom fo	L Abovo Loo	a /if mare see	oo io acada	od plagge					
	ISTAIL ETIQUE			n Above Loa	in a contract of the contract	ice is neede	eu piease a	audu	a paye;	Managaran es	e en central	
First Name		Middle Name	1		First Name					Middle	Name	
Jonathun Last Name/Organization Name		<u> </u>			Last Name/Or	anization Na	me			<u>i</u>		
White					East Hallians	,						
Address					Address							
204 Bryson Pl.												
City		State	Zip Co	ode	City					State		Zip Code
Mt. Juliet	 	TN	37122)						<u> </u>		
Amount Guaranteed Outstanding \$7,661.65	;				Amount Guaranteed Outstanding							
First Name		Middle Name		erio (en la granda de la granda d	First Name	on the second	aferrosi (romanes es este	to established		Middle	Name	
					The state of the s							
Last Name/Organization Name					Last Name/Organization Name							
Address				Address								
		1	,	··· ·· ·· · · · · · · · · · · · · · ·						T :		
City		State	Zip Co	de	City					State		Žip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstar	nding					
	edanica valor varay	Series and Series and Series	personal representation	enkarakenelingan enemana ene	alaterakan dan emeripakan	en de la Récentración de	anicional revision	ASSESSED STATES	Kesterran valorities	enantesan		
First Name		Middle Name			First Name Middle Name						;	
Last Name/Organization Name		•			Last Name/Organization Name							
Address		······································			Address							
radios												
City		State	Zip Co	de	City				State		Zip Code	
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
		name i mai kwia ini kata nami	piera menyanèna	SDEETS/ASSESSESSESSES	2.00002474024105000000000000000000000000000000000	ASSESSATION OF THE PARTY OF THE	erden der en en	omiesta souteerie	VARSO LOS CONTROLOS C		zutenatenia	
First Name Middle Name				First Name Middle Name								
Last Name/Organization Name		<u> </u>			Last Name/Org	anization Nar	me			<u> </u>		
				· ·								
Address			Address									
City		State	Zip Co	de	City				:	State		Zip Code
Amount Guaranteed Outstanding	······································	1	L		Amount Guarai	iteed Outstan	iding			L		
и									· · · · · · · · · · · · · · · · · · ·			
4. Totals for all Loans (complete on la	st page of	temized loa	ns)		Outstanding Lo	an Balance	Loan	IŞ	Loan		Outsi	tanding Loan Balance
(Total loans received should also be shown in	ritem 16, on s	ummary page.)			(Beginning o	f Period)	Recei	ved	Payme			(End of Period)
(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.)				\$7,	61.65	\$0	•	\$0	87,661.65		,661.65	

JUL 30 2020

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE CHAPTE

	ELECTION COMMISSION 2. REPORT COVERING THE PERIOD					
NAME OF CANDIDATE OR COMMITTEE Jonathan White	2. REPORT COVERING THE PERIOD TO: 07/27/2020					
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period) N/A			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name Middle Name						
Last Namo/Business Name	1					
Address						
City	State Zip Code					
Description of Obligation	1	I				
First Name	Middle Nan	пе				
Last Name/Business Name	<u> </u>		-			
Address			-			
City	State	Zip Code				
Description of Obligation	<u> </u>	F				
First Name	Middle Nan	ne				
Last Name/Business Name			-			
Address			-	:		
City	State	Zip Code				
Description of Obligation	I	<u> </u>				
First Name	Middle Nan	energy open menter of supplies to see				
Last Name/Business Name						
Address			<u>.</u>			
City	State	Zip Code				
Description of Obligation						
First Name	Middle Nam	e			for section and the section of the s	
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						***************************************
4. TOTALS	isaniisaa kaisaa ka					
(Total from Outstanding Balance - (End of Period) α in item 23b. on summary page.)	olumn must	atso be shown	\$0			\$0