CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

For	Single-Candid	ate Committe	es	MAN 28 ZUZZ	7
1. DATE OF REPORT 01-21-22		ATE OR COMMITTEE		WILSON COUNTY	ОИ
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION D		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 1502 Post Dak Point	city Mt. Iuliet	State TN	Zip Code 31132	Phone 4/5-113-115	90
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route		State	Zip Code	Phone	
5. OFFICE SOUGHT (include district number, if applicable) 6. NAME OF POLITICAL TREASURER (may be candidate) Art Giles					
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH PR	ARY GENERAL	MID-YEAR		
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b.	ENDING DATE OF REPO			
 9. (Check one) a. This campaign is exempt from detaile tures total \$1,000 or less for this repo b. This campaign is required to file a det and/or expenditures total more than \$ 	rting period. (Complete ite tailed financial disclosure b	ems 12d., 12e. and 12f.) ecause contributions (in)		
I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we shenefit of the candidate or for any other non signature of candidate	ons and expenditures requi swear or affirm that no can	red to be reported by the nearing contributions have d by the federal internal	e candidate comm ve been expended	ittee by the Campaign for the personal financia	al
11. WITNESS SIGNATURE Signature of witness	/27-27 date	signa	A J	. \	22
12. SUMMARY a. BALANCE ON HAND LAST REPORT			~/ ¹ >—	7 <i>4</i>	
b. TOTAL RECEIPTS THIS PERIODc. TOTAL DISBURSEMENTS THIS PERIOD			200.	25	
d. BALANCE ON HAND (12.a. plus 12.b. m	iinus 12.c.)			\$ 210.49	7
d. BALANCE ON HAND (12.a. plus 12.b. m				\$ 500-00	2
4 TOTAL ORLICATIONS OF ITSTANDING				\$ -6	_



SUMMARY PAGE - CANDIDATE

JAN 28 2022

	WIL	SON COUNTY				
13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT	PANG THE PERIOD				
Art Giles	FROM: 7-1-21	TO: 1-15-22				
RECEIPTS 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	.g., printing, postage,	gasoline)				
a. Experience (4 ver experience)						
Carollaren Paraner Menit \$ 19.1	7					
College derivers mary	17					
Cooperation of across wheat \$ 38.	<u>.</u> 34					
General May - asman, way	<u> </u>					
Total of Expenditures (\$100 or less each payee)	\$ <u>76.68</u>	_				
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>1.31,57</u>					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		\$208.23				
20 LOAN REPAYMENTS MADE THIS PERIOD		\$				
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		\$ 208.25				
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)	\$					
. Itemized Obligations Outstanding (Over \$100 each)\$						
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i iter						



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE WILSON COUNTY

1. NAME OF CANDIDATE OR COMMITTEE	let 6	Seles		2. REPORT COVE	TO / -/3-22		
711 0110					Amount		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)							
	Middle Na	A STATE OF THE PARTY OF THE PAR	Purpose of Expenditure		Amount of Expenditure		
Do Daddy WOLL		intermet/utbiles		131.57			
Last Name/Business Name				,			
Address 14455 N Haden Road							
City Scottsdale	State	Zip Code 952460					
First Name	Middle Nar		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
Address							
City	State	Zip Code					
irst Name Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last 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	131.57						