CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

APR 12 2022

1. DATE OF REPORT 1. DATE OF REPORT 2.a. NAME OF CANDID 1. DATE OF REPORT	ATEORCOMMITTEE	EI	WILSON COUNTY
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE	EG 11011 GG 1111111111111111111111111111
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City 1.2.0.2. Campe lot Bouts mt Tuliet	State	Zip Code 7122	Phone
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City	State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if applicable) 6.	NAME OF POLITICAL	TREASURER (may be o	andidate)
QUARTER QUARTER QUARTER PRIN] [] RE- PRE- MARY GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
January 16, 2022	ending date of REPO	2022	
 9. (Check one) a. This campaign is exempt from detailed disclosure because contures total \$1,000 or less for this reporting period. (Complete it b. This campaign is required to file a detailed financial disclosure and/or expenditures total more than \$1,000 for this reporting period. 	ems 12d., 12e. and 12f.) because contributions (in)	
10. I/we do solemnly swear or affirm that the information contained in the accurate accounting of campaign contributions and expenditures requirements. Financial Disclosure Act. Additionally, I/we swear or affirm that no call benefit of the candidate or for any other nonpolitical purpose as defined as signature of candidate.	ired to be reported by the mpaign contributions has ed by the federal internations.	e candidate committee: ve been expended for th	by the Campaign
11. WITNESS SIGNATURE **BHASK O TWINSTAGEN 4/427 signature of witness date	signa	fure of witness	4/6/22 date
12. SUMMARY		2.000	
a. BALANCE ON HAND LAST REPORT		1.407)	
b. TOTAL RECEIPTS THIS PERIOD		\$	
c. TOTAL DISBURSEMENTS THIS PERIOD		(5)	00 11 115
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$	2204.47
e. TOTAL LOANS OUTSTANDING		\$	
f. TOTAL OBLIGATIONS OUTSTANDING		\$	<i>0</i>

SUMMARY PAGE - CANDIDATE

APR 12 2022

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14	PEROPT COVE	4 COUNTY	
lem Nicholson	FRO	M: 1/11/2	TO: 2	RERIC
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)		- Hulask	- 3/	21/1
a. Unitemized Contributions (\$100 or less from each source this period)	\$	\bigcirc		
b. Itemized Contributions (over \$100 from each source this period)			-	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.).	Ψ	1000	e	~ ~
16. LOANS RECEIVED THIS REPORTING PERIOD	***********	*******************	\$ 10	00
17. INTEREST RECEIVED THIS REPORTING PERIOD	************	*******************	\$	
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	***********		\$	2
DISBURSEMENTS			\$ <u> </u>	<u>XO</u>
19. EXPENDITURES (other than loan payments)				
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e				
•		ting, postage, ga	asoline)	
*				
\$				
\$				
				
\$				
 \$				
\$				
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.b.)		\$	705	53
20. LOAN REPAYMENTS MADE THIS PERIOD		•	()	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		ф	705	53
22.IN-KIND CONTRIBUTIONS		φ	7 10.	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$	O		
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.)			0	
23. OBLIGATIONS		Ψ		=
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 1			0	
Total (made be shown i nem	٠٠٠٠ (١٠٠-	·		



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVERING THE PERIOD em Nicho 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) Contribution Received For: Middle Name Amount of Contribution Primary Election General Election Last Name/Organization Name \$1000 Address Runoff (Local Elections Only) Zip Code 3 70 Date of Contribution Aggregate This Election City 01/28/2022 Occupation 100 Employer Middle Name Contribution Received For: First Name Amount of Contribution Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Address City State Zip Code Date of Contribution Aggregate This Election Occupation Employer Contribution Received For: First Name Middle Name Amount of Contribution Primary Election General Election Last Name/Organization Name Address Runoff (Local Elections Only) Date of Contribution Aggregate This Election City State Zip Code Occupation Employer Contribution Received For: Amount of Contribution First Name Middle Name Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Address City State Zip Code Date of Contribution Aggregate This Election Occupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)

APR 12 2022

WESON COUNTY ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS CANDIDATE

1. NAME OF CANDIDATE OR COMMIT	TEE			2. REPORT COVE				
	FROM:	TO:						
3. TOTAL ITEMIZED IN-KIND CONTRIE	Amount							
4. COMPLETE THE APPROPRIATE ITEMS I			<u> </u>		ntributor during the period)			
First Name	Middle Na	ame	In-Kind Contribution Receive	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 Emp	oloyer	•						
First Name	Middle Na	ame	In-Kind Contribution Receive		Value of In-Kind Contribution			
Last Name/Organization Name			1 =,	General Election				
Address			Date of In-Kind Contribution	ns Only)	Aggregate this Election			
	Chata	7in Code	Description of In-Kind Contribution		- aggregate this Election			
City Occupation Emp	State	Zip Code	Description of III-Alia Contribution					
Occupation	loyer							
First Name Middle Name			In-Kind Contribution Receive	d For:	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 Emp	loyer							
	1		In Kind Contribution Descine	d For	Makes of la Kind Contribution			
First Name	Middle Na	me	In-Kind Contribution Receive Primary Election	General Election	Value of In-Kind Contribution			
Last Name/Organization Name			Runoff (Local Election	ns Only)				
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contribution					
Occupation Emp	loyer							
First Name	Middle Nan	ne	In-Kind Contribution Receive		Value of In-Kind Contribution			
Last Name/Organization Name			7 -	General Election				
Address			Runoff (Local Election	s Only)	Aggregate this Election			
	7 in Code			33.0				
City Occupation Empl	Zip Code	Description of In-Kind Contribution						
- CONTRACTOR OF THE CONTRACTOR								
TOTAL ITEMIZED IN-KIND CONTRIE (Carry forward to item 3. of next page if additional (If this is the last page of in-kind contributions, this	al pages of this form a		ry.)					

APR 12 2022

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITT	EE			2. REPORT COV	ERING THE PERIOD	
3. TOTAL ITEMIZED CAMPAIGN EXPEN		POM PRECEDING DA	CE (onto the if the item in the	7 7	2 TO: 3/31/20 Amount	
4. COMPLETE THE APPROPRIATE ITEMS FO	OR EACH ITE	EMIZED EXPENDITURE	(expenditures Intaling more than \$1)	20 to any payon during the		
First Name Crown	Middle		Purpose of Expenditure	or to any payee during the	Amount of Expenditure	
Address 100 Oak Street	State TN	Zip Code 37087	Push c	ards 8	\$433.51	
First Name Signs On The Ch Last Name/Business Name	Middle	Name	Purpose of Expenditure	~ 6	Amount of Expenditure	
Address 11525A Stonehol City Austin	State	Dr. Su 100 Zip Code 78758	- yard si	gns	\$ 362.02	
First Name	Middle N	ame	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name			1			
Address		11	1			
City	State	Zip Code				
First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	.,		1			
Address						
City	State	Zip Code	-			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name			-			
Address			1			
City	State	Zip Code				
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure	
ast Name/Business Name						
Address						
City	State	Zip Code				
5. TOTAL ITEMIZED EXPENDITURES	*					
(Carry forward to item 3. of next page if additional page (If this is the last page of expenditures, this amount mu	es of this form a ust be shown in	are used.) item 19b. of summary.)			\$795.53	

Page _____ of ____

RDA 1159



ITEMIZED STATEMENT OF LOANS - CANDIDATE 12 2022

1. NAME OF CANDIDA	TE OR COMMITTEE							2. I	REPORT DM:	COVE	THE STATE OF THE S	TESHINE.
3. COMPLETE THE APP	PROPRIATE ITEMS	FOR EACH	ITEMIZ	ZED LOAN	(loans totaling n	nore than \$1	00 from any s	source	during the p	eriod)	1	
Complete the Following for t	he Source of the Loan											
First Name	Middle Nar	ne		Outstanding Loan Balance (Beginning of Period)			oans Loan eceived Payments			Outstanding Loan Balance (End of Period)		
Last Name/Organization Name				1								
				Loan Receiv	Date of Loon							
City	State	Zip Code		Primary Election General Election Runoff (Local Elections Only)			al Flection					
	List All Endor	sers or Guara	antors fo	or Above Loa	in (If more spa	ce is need	ed please a	ttach a	page)			
First Name		Middle Name			First Name					Middle	Name	
Last Name/Organization Name					Last Name/Org	anization Na	ame					
Address					Address							
City		State	Zip Co	ode	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guaran	iteed Outsta	nding					
First Name Middle Name					First Name Middle Name							
Last Name/Organization Name					Last Name/Organization Name							
Address					Address							
City		State	Zip Co	de	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guarant	teed Outstar	nding					
First Name		Middle Name			First Name					Middle	Name	
Last Name/Organization Name		N			Last Name/Organization Name							
Address					Address							
City		State	Zip Coo	de	City					State	П	Zip Code
Amount Guaranteed Outstanding					Amount Guarant	eed Outstan	ding					
First Name	irst Name Middle Name				First Name Middle Name							
ast Name/Organization Name				Last Name/Organization Name								
Address					Address							
City		State	Zip Cod	e	City					State	T	Zip Code
Amount Guaranteed Outstanding					Amount Guarante	eed Outstan	ding					
Totals for all Loans (comp (Total loans received should also I (Total loan payments should also I (Total outstanding loan balance sho	oe shown in item 16. on su oe shown in item 20. on su	mmary page.)			Outstanding Load (Beginning of		Loans Receive		Loan Payme			anding Loan Balance End of Period

NECLIVED

APR 1 2 2022

WILSON COUNTY TEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR	COMMITTEE			2 PEDODT CO	VEDING THE	
2 COMPLETE THE				2. REPORT CO FROM:	RIOD	
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)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balar (End of Period)
First Name	Middle	Name				
Last Name/Business Name	Business Name					
Address						
City	State	Zip Code				
Description of Obligation						
Flrst Name		*				
	Middle N	ame				
Last Name/Business Name						
Address			- 1			
City	State	Zip Code	-			
Description of Obligation						
First Name						
	Middle Na	me			0,1	
ast Name/Business Name	· · · · · · · · · · · · · · · · · · ·					
Address			-			
City	State	Zip Code	1			
Description of Obligation						
	Middle Nan		y			
	Widdle Nan	ne	1			
ast Name/Business Name] [
ddress			1			
ity	State	Zip Code	1			
escription of Obligation						
rst Name						
	Middle Nami					
t Name/Business Name						
iress						
y	State	Zip Code				
scription of Obligation						
TOTALS						
otal from Outstanding Balance - (End o in item 23b. on summary page.)	f Period) column must a	Iso be shown				