1				
	r State and L	ISCLOSU ocal Candidate idate Committe	<b>9</b> \$	RECEIVED 10
		DIDATE OR COMMITTEE		JUL 27.2022
2.b. F COMMITTEE, NAME OF CANDIDATE	<u> </u>		3. ELECTION DATE	CTION COMMISSION
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 1303 Came of Bary	city Mt. Ju	liet TN	Zip Code 37122	Phone 6/58044089
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	than 4.a.) City	State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if a	applicable) 6.	NAME OF POLITICAL	TREASURER (may be	candidate)
7. CATEGORY OR REPORT (Check one)  FIRST SECOND THIRD OUARTER QUARTER QUARTER	OLIARTER PR	PRE- RIMARY GENERAL b. ENDINGDATE OF REPO	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD	8.1	b. ENDINGUATE OF REPO	5.22 5.22	
a. This campaign is exempt from detailed tures total \$1,000 or less for this report b. This campaign is required to file a deta and/or expenditures total more than \$1  10. I/we do solemnly swear or affirm that the infraccurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we signature of candidate	illed financial disclosure ,000 for this reporting ormation contained in the sand expenditures recovered to a stiff of the sand expenditures.	e because contributions (in period.  this campaign financial disquired to be reported by the campaign contributions havined by the federal internal	acluding in-kind) received in the control of the co	ed total more than \$1,000  and that this report is an by the Campaign
11. WITNESS SIGNATURE  BIOCH WUTGESS  signature of witness	07 <i>12</i> 6	Signa	The ture of witness	1/26/22 dale
12. SUMMARY  a. BALANCE ON HAND LAST REPORT			\$ 1965.0	2
b. TOTAL RECEIPTS THIS PERIOD			\$	)
c. TOTAL DISBURSEMENTS THIS PERIOD			\$	-1
d. BALANCE ON HAND (12.a. plus 12.b. mi	nus 12.c.)			\$ 681, do
e. TOTAL LOANS OUTSTANDING				\$
f. TOTAL OBLIGATIONS OUTSTANDING				\$ ———



KECFIVED

## SUMMARY PAGE - CANDIDATE

JUL 2 7 2022

13. NAME OF CANDIDATE OR COMMITTEE (In Full) THE NICHOLSON SEC DIT	14. REPORT COVERING THE PERIOD FROM: 1/4/2004 dom/sts/2/5/2/2			
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)	\$ <u>200.00</u>			
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>200.00</u>			
16. LOANS RECEIVED THIS REPORTING PERIOD	s			
47 INTEREST RECEIVED THIS REPORTING PERIOD				
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 200,00			
DISBURSEMENTS				
19. EXPENDITURES (other than loan payments)				
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e    about	00 25 00 24 00 —			
Total of Expenditures (\$100 or less each payee)b. Itemized Expenditures (Over \$100 each payee this period)				
TOTAL EXPENDITURES (other than loan repayments)(add 19 a, and 19.b.)	\$ 1477,79			
20. LOAN REPAYMENTS MADE THIS PERIOD	//			
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)				
22. IN-KIND CONTRIBUTIONS				
the second 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.)\$				
OBLIGATIONS     a. Unitemized Obligations Outstanding (\$100 or less each)	\$			
b. Itemized Obligations Outstanding (Over \$100 each)	/s/			
b. Itemized Obligations Outstanding (Over \$100 cach,				



## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE 22

NAME OF CANDIDATE OR COMMITTEE  3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (c)  First Name    Complete the Appropriate Items for Each Itemized Contribution (c)    First Name			FROM: 7/1/25 GE (enter \$0 if first itemized page)	Amount of Contribution  200,00  Aggregate This Election
First Name	Middle Nan	ne	Contribution Received For:	Amount of Contribution
Last Name/Organization Name			Primary Election General Election	
Address			Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Employer				
Employer		O. 12 Car Descived Fee	Amount of Contribution	
First Name Middle Name		Contribution Received For:	Amount of Contribution	
Last Name/Organization Name				
Address		Runoff (Local Elections Only)		
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Employer				
First Name	Middle Nam	e e	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		Primary Election General Election		
		Runoff (Local Elections Only)		
Address  City State Zip Code		Date of Contribution	Aggregate This Election	
Chj				
Occupation				
Employer	y h ~ h	Marie Company		7 ties
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.)				200.00

INCULTED

JUL 2 7,2022

## ITEMIZED STATEMENT OF EXPENDITURES -WCANDIDATE

ELECTION COMMISSION

3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZE	I PRECEDING PAGE (enter \$0 if first itemized	FROM: 7/1/23 10: 7/25/22 Amount						
TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM     COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZE	PRECEDING PAGE (enter 50 if first itemized							
4. COMPLETE THE APPROPRIATE TEMOT OR EACH TEME	-I) - XP-NIJIIIJKE (expenditures totaling mole tiali \$	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)						
First Name /	Purpose of Expenditure	Amount of Expenditure						
Harre Broc	labor							
Last Name/Business Name		.200.00						
Address 1303 Camplot Bay								
City Mt. Juliet State	Zip 39/1/22							
First Name Shall Oil Middle Name	Purpose of Expenditure	Amount of Expenditure						
Last Name/Business Name	gas	62.25						
Address		(2,2)						
City Mt. Juliot State 7	Zip Code 37122							
First Name Shaddle Name	Purpose of Expenditure	Amount of Expenditure						
Last Name/Business Name	araph	ics 1000.00						
Address	graph							
City wall Tlad State	Zip Code							
mt Julie Tal		Amount of Expenditure						
First Name Middle Name	Purpose of Expenditure	ATTOUR OF Experiorate						
Last Name/Business Name	000	Ce5.54						
Address	- Jos							
City mt. Juliet TN	Zip Code 3712-2							
First Name Tanham Middle Name War	Purpose of Expenditure	Amount of Expenditure						
Last Name/Business Name Sov	labor	150.00						
Address 1303 Camelot Bay		, , , ,						
city Mt Juliet State	Zip Code 37122							
First Name Middle Name	Purpose of Expenditure	Amount of Expenditure						
Last Name/Business Name								
Address								
City	Zip Code							
<ol> <li>TOTAL ITEMIZED EXPENDITURES         (Carry forward to item 3. of next page if additional pages of this form are (If this is the last page of expenditures, this amount must be shown in ite     </li> </ol>	used.)	1,477.79						