### CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF CA				OCT 1-1 2022
10/10/22	TYLA	er J	CHANOL	KA	MIT SON OF
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE	CTICH COMMISSION
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 1008 THURMAN ST	City M. JUL	147	State TV	Zip Code 37/22	Phone 615-405-0279
CANDIDATE'S HOME ADDRESS (if differen Street or Rural Route	t than 4.a.) City		State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, it			4	REASURER (may be ca Long 加	andidate)
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE-	PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD  7 - 26 2 2	GOTTVE	8.b. ENDING	DATE OF REPO	RTINGPERIOD 22	
9. (Check one)  a. This campaign is exempt from detaile tures total \$1,000 or less for this report.  b. This campaign is required to file a deand/or expenditures total more than \$1.000 or less for this report.	rting period. (Comp tailed financial disclo	sure because	, 12e. and 12i.)		
I/we do solemnly swear or affirm that the ir accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other nor signature of candidate.	ons and expenditures	s required to be no campaign o	ontributions have	e been expended for the	
11. WITNESS SIGNATURE  WALL  signature of witness	/D//D/22	2 _	Signal	ture of witness	w/lo/zz date
12. SUMMARY				c 25-3	-9
a. BALANCE ON HAND LAST REPORT				.\$	
b. TOTAL RECEIPTS THIS PERIOD				.\$ 7,0002	
<ul> <li>12. SUMMARY</li> <li>a. BALANCE ON HAND LAST REPORT</li> <li>b. TOTAL RECEIPTS THIS PERIOD</li> <li>c. TOTAL DISBURSEMENTS THIS PERIOD .</li> </ul>				.\$	1505 68
d. BALANCE ON HAND (12.a. plus 12.b. n	ninus 12.c.)			\$	1305 -
e. TOTAL LOANS OUTSTANDING			••••	\$.	7,383 -
f. TOTAL OBLIGATIONS OUTSTANDING			•••••••	\$	<u>Ø</u>



### SUMMARY PAGE - CANDIDATE

	14. REPORT COVERING THE PERIOD
13. NAME OF CANDIDATE OR COMMITTEE (In Full)  TYLES J CHANOLAS	FROM: 7/26/22 TO: 9/30/22
RECEIPTS	RECEIVE
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ UCT 11 2022
b. Itemized Contributions (over \$100 from each source this period)	# WILSON COUNTY
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 177 COMMISSIO
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.)	\$ 1,000 -
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)
BANK FIERS \$ 20°	
\$	_
\$	
<u> </u>	
	_
	_
\$	_
\$	_
\$	
Total of Expenditures (\$100 or less each payee)	.s 20°°
b. Itemized Expenditures (Over \$100 each payee this period)	. 169-
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	3 70 7
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	9
a. Unitemized Obligations Outstanding (\$100 or less each)	\$
b. Itemized Obligations Outstanding (Over \$100 each)	\$
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE INTY

1. NAME OF CANDIDATE OR COMMITTEE			}	2. REPORT COVER	TO
TYLAR J C	CHANC	DLER		FROM: 7/26/22	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FRO	M PRECEDING PAG	E (enter \$0 if first itemized page	age)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH ITEMIZ	ED CONTRIBUTION (c	ontributions totaling more than \$	100 from any contributor)	
First Name	Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name	e n		Primary Election	General Election	1,00000
Address 42	2 Co	451	Runoff (Local Elections	s Only)	
Last Name/Organization Name  SOUTHIERN STATIES PL  Address 2155 WILHWAY 42  City Mc DONOUCH	State	Zip Code 30252	Date of Contribution		Aggregate This Election
Occupation	Q N	3005	8/1/22		1,00000
Employer					1,000 -
First Name	Middle Nam	е	Contribution Received For:		Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address			Runoff (Local Election	s Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
					STATE OF THE PARTY
First Name	Middle Name	9	Contribution Received For:		Amount of Contribution
	Middle Name	9		General Election	Amount of Contribution
	Middle Name	9	_	General Election	Amount of Contribution
Last Name/Organization Name	Middle Name	Zip Code	Primary Election	General Election	Amount of Contribution  Aggregate This Election
Last Name/Organization Name  Address  City			☐ Primary Election ☐	General Election	
Last Name/Organization Name  Address  City  Occupation			☐ Primary Election ☐	General Election	
Last Name/Organization Name  Address  City  Occupation			☐ Primary Election ☐ ☐ Runoff (Local Election ☐ Date of Contribution	General Election	Aggregate This Election
Last Name/Organization Name  Address  City  Occupation		Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:	General Election	
Last Name/Organization Name  Address  City  Occupation  Employer  First Name	State	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:	General Election  S Only)  General Election	Aggregate This Election
Last Name/Organization Name  Address  City  Occupation  Employer  First Name	State	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:	General Election  S Only)  General Election	Aggregate This Election  Amount of Contribution
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name	State	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:	General Election  S Only)  General Election	Aggregate This Election
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name  Address	State  Middle Name	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:  Primary Election  Runoff (Local Election	General Election  S Only)  General Election	Aggregate This Election  Amount of Contribution
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name  Address  City	State  Middle Name	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:  Primary Election  Runoff (Local Election	General Election  S Only)  General Election	Aggregate This Election  Amount of Contribution

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER			
TYLKE J. CH	ANOL.	KA		FROM: 7/26/22	TO: 9/30/22		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU			(enter \$0 if first itemized page	ge)	Amount		
4. COMPLETE THE APPROPRIATE ITEMS FOR E.	ACH ITEMI	ZED EXPENDITURE (e.	xpenditures totaling more than \$100	to any payee during the peri	od)		
First Name	Middle Nan		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			ADVERTISEA	MENTS	149.91		
Address WAT							
Address  City  MENLO  PARK  Last Name/Business Name  FACE BOOK  ADS  Address  PARK	State	Zip Code 94025					
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Name	9	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		LT. O. t.					
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	of this form a	re used.) item 19b. of summary.)			14991		



1. NAME OF CANDIDATE OR COM	MITTEE								COVER	WILSON COUNTY THE PERIODA
							F	ROM: 7/26/2	,	TO: 9/30/22
JULEN J  3. COMPLETE THE APPROPRIATE	ITEMS F	OR EACH	ITEMIZ	ED LOAN	Inan's totaling m	ore than \$100			riod)	1130/11
		OKLACII	I I LIVIIZ	LD LOMIN	(loans totaling in	10/0 (/(0// 4// 4//				
Complete the Following for the Source of			_	Outstanding I	oon Palanco	Loans		Loan	Outsta	anding Loan Balance
First Name	Middle Nam	•		(Beginning		Receive	ed P	ayments		(End of Period)
Last Name/Organization Name				1,00	200	Ø	.	Ø	1,0	00000
LONG III								Date of Loa		
Address	On			Loan Receive		П	Clastica	1		4
313 6/2300	State	Zip Code		Priman		☐ General	Fiection	11/2	6/ 2	1 ORILINAL
MIJULIAT		3712			(Local Elections					
Lic	t All Endon	sers or Guar	antors fo	or Above Loa	n (If more spa	ce is needed	d please attac	ch a page)	Lieta	
First Name		Middle Name	e		First Name				Middle N	lame
ast Name/Organization Name					Last Name/Org	anization Nar	ne			
					Address					
Address					, 154, 154					
City		State	Zip Co	ode	City				State	Zip Code
mount Guaranteed Outstanding			-		Amount Guarar	teed Outstan	ding			
	F -1153	Lacada Nass	-		First Name	THE #5/2/3			Middle N	lame
First Name		Middle Name	,		I not runo					
ast Name/Organization Name					Last Name/Org	anization Nan	ne			
A Juliana					Address					
Address										
City		State	Zip Co	ode	City				State	Zip Code
mount Guaranteed Outstanding			-		Amount Guaran	teed Outstand	ding			
			7		let (Many)				Middle	Name
First Name		Middle Name	)		First Name				Mildate	varne
ast Name/Organization Name					Last Name/Org	anization Nan	ne			
Address					Address					
nuieso										
City		State	Zip Co	de	City State Zip Code					Zip Code
mount Guaranteed Outstanding					Amount Guaran	teed Outstand	ling			
		2011 4	- 7 -		Cient Name :				Middle N	ame
irst Name		Middle Name			First Name				I WINDOW	
st Name/Organization Name					Last Name/Orga	anization Nam	e	· · · · · ·		
ddress			_		Address					Re-E
		State	Zip Co	de	City				State	Zip Code
City		Olale	1 2 ip 00			load Out-t-	lina			
Amount Guaranteed Outstanding			Amount Guaranteed Outstanding							



OCT 112022

		CTA		B4 - NI -	r of i	OAN	6 6	ANDI	<b>NAT</b>	E 1000 1		
NAME OF CANDIDATE OR COM	MMITTEE			MEN	OFI	LOAN	2.	REPORT C	OVERIN	E WILSON C ELECTION C G THE PERIOD O: 9/30/22		
TYLER J.				ED LOAN "		15 au \$400				9/30/22		
3. COMPLETE THE APPROPRIATI	ETTEMS	OR EACH I	EMIZ	ED LOAN (I	loans totaling m	nore than \$100	from any source	e during the peri	ou)	10 V 10 V		
Complete the Following for the Source of	-			0.4.14:1	an Deleges	Loone		aan	Outetar	ding Loan Ralance		
irst Name Middle Name Outstanding L				oan Balance Loans Loan Outstanding Loan Balance of Period) Received Payments (End of Period)					ind of Period)			
Last Name/Organization Name				838	5-20	Ø		Ø	8,	385-20		
Address				Loan Receive				Date of Loan				
1008 THURMAN	ST			Primary	Election	General	Election	11/2	6/2	1 ORIGINAL		
1008 THURMAN City TULIAT	State	Zip Code 37/22		Runoff(	Local Elections	Only)						
		sers or Guara		or Above Loai	n (If more spa	ce is needed	please attach	n a page)				
First Name		Middle Name			First Name				Middle Na	ame		
Last Name/Organization Name					Last Name/Org	ganization Nam	ne					
					Addroca							
Address					Address							
City		State	Zip Co	ode	City				State	Zip Code		
Amount Guaranteed Outstanding	ount Guaranteed Outstanding				Amount Guaranteed Outstanding							
Finishlama		Middle Name	-	***	First Name				Middle N	Middle Name		
rst Name Middle Name				, mortunio								
Last Name/Organization Name					Last Name/Org	ganization Nan	nė					
Address					Address							
City		State	Zip C	ode	City				State	Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
First Name Middle Name			First Name Middle Name					Name				
Last Name/Organization Name					Last Name/Org	ganization Nan	ne					
Address			_		Address							
City		State	Zip C	ode	City				State	Zip Code		
Amount Guaranteed Outstanding			<u> </u>		Amount Guaranteed Outstanding							
our occurrency												
First Name	arne Middle Name			First Name Middle Name								
Last Name/Organization Name			Last Name/Organization Name									
Address					Address							
City		State	Zip C	ode	City				State	Zip Code		
Amount Guaranteed Outstanding			Amount Guaranteed Outstanding									
, , , , , , , , , , , , , , , , , , , ,			Outstanding L		Loans	Loa		Outstanding Loan Balance				
(Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.)			(Beginning		Received	Paym	,	(End of Period) 9.385 20				
(Total outstanding loan balance should also be shown in item 12.e. on front page.)			7,38	, —	9	9		1,00) -				