.•		3			
	r State and Single-Car	i Local (ndidate (Candidat Committ	tes	SEP 3 (1 2022 10
1. DATE OF REPORT	2.a. NAME OF C	ANDIDATEOR	COMMITTEE	E	WILSON COUNTY
2.b. IF COMMITTEE, NAME OF CANDIDATE	(312711)		7.5	3. ELECTION DA	TE OMMISSION
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 4.2 Route	City Lebanon		State	Zip Code 37087	Phone 615-202 -1134
1.b. 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	applicable) District	6. NAME	OF POLITICAL	TREASURER (may	be candidate)
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER 3.a: BEGINNING DATE OF REPORTING PERIOD	FOURTH QUARTER	PRE- PRIMARY 8.b. ENDING	PRE- GENERAL GDATE OF REF	MID-YEAR SUPPLEMENTA PORTING PERIOD	YEAR-END L SUPPLEMENTAL
7-24-22), (Check one)		C	1-30-	22	
b. This campaign is required to file a degrand/or expenditures total more than \$ 10. I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution. Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other nor signature of candidate.	formation contained	d in this campa	aign financial of the reported by contributions he federal intern	disclosure report is tru the candidate commit ave been expended fo	e and that this report is an
1. WITNESS SIGNATURE signature of witness	10 1 22 date	_	Musign	nature of witness	10) 22 date
2. SUMMARY				, 255 66	
BALANCE ON HAND LAST REPORT TOTAL RECEIPTS THIS PERIOD				\$ 100 00	
c. TOTAL DISBURSEMENTS THIS PERIOD				\$ 62	
d. BALANCE ON HAND (12.a. plus 12.b. n					\$ 293 ==
e. TOTAL LOANS OUTSTANDING					\$0
f. TOTAL OBLIGATIONS OUTSTANDING					\$

NECLIVED

SEP 3 0 2022

SUMMARY PAGE - CANDIDATE

WILSON COUNTY

42	NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVI	A WOMHESPERIOD					
13.	Glenn Dentin	FROM: July 26	TO: Sept. 30					
RE 15.	CEIPTS CONTRIBUTIONS (other than loans and interest)	0						
	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							
	INTEREST RECEIVED THIS REPORTING PERIOD							
18.	8. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)							
	DISBURSEMENTS							
19.	19. EXPENDITURES (other than loan payments)							
а	. Expenditures (\$100 or less each payee this period) (must be listed by category - e.	g., printing, postage,	gasoline)					
	Sherian Donton (printing water ice snow) \$ 62 =							
	\$							
	\$							
	•							
	\$							
	\$							
	\$							
	\$							
-	otal of Expenditures (\$100 or less each payee)	\$ 62 =						
	Itemized Expenditures (Over \$100 each payee this period)							
	TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		\$ 62 0.9					
	LOAN DERAMACNITO MADE THIS DEDIOD		\$					
20.	TOTAL DISPURSEMENTS (add 19 c and 20) (must be shown in item 12.c.)		\$ 62 0,7					
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)								
22.	IN-KIND CONTRIBUTIONS	\$						
a.								
b.								
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 item	n 12.f.)	\$					



SEP 3 0 2022

ITEMIZED STATEMENT OF CONTRIBUTIONS - CAND BOATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	RING THE PERIOD
I NAME OF CANDIDATE OR COMMITTEE				FROM:	10:
	Amount				
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FRO	OM PRECEDING PAC	GE (enter \$0 if first itemized p	age)	
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH ITEMIZ	ZED CONTRIBUTION (contributions totaling more than \$	100 from any contributor	
First Name	Middle Nam	e	Contribution Received For:		Amount of Contribution
Jerry Trans			Primary Election	General Election	A 100 =
Last Name/Organ zation Name					'
Beavers			Runoff (Local Election		
Address ,					A 711 F1 F1
ity M. Twict State Zip Code			Date of Contribution	Aggregate This Election	
Occupation Rebired					
Employer					
First Name	Middle Nam	e	Contribution Received For:	Amount of Contribution	
Last Name/Organization Name			Primary Election		
Address			Runoff (Local Election		
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
First Name Middle Name		Contribution Received For:	Amount of Contribution		
Last Name/Organization Name			Primary Election	General Election	
			Runoff (Local Election		
Address			Mullon (Eddar Electron	is Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
First Name	Middle Nam	e	Contribution Received For:		Amount of Contribution
			Primary Election	General Election	
Last Name/Organization Name					
Address			Runoff (Local Election	ns Only)	A THE Floring
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of (If this is the last page of contributions, this amount must	of this form ar	e used.) tem 15b. of summary.)			£100 00



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1 NAME OF CANDIDATE OR COMMITTEE			REPORT COVER	ING THE PERIODON		
1. NAME OF CANDIDATE OR COMMITTEE		FROM: July 26	TO: Japh. 30			
N. C.					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)						
4. COMPLETE THE APPROPRIATE ITEMS FOR E	10		xpenditures totaling more than \$100	to any payee during the post	A mount of Europediture	
First Name	Middle Na	Renea	Purpose of Expenditure Supplies, ice, we Printing chin poll workers	ater made	Amount of Expenditure	
Last Name/Business Name	1	, , , , ,	Original dein	ke Ar	62=	
Denton			nall Soutas			
Address			pon wares			
City Lebanon	State	, Zip Code				
First Name	Middle Nar	mė	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middle Nar	me	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				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address Tip Code						
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 mus	of this form a	ire used.) item 19b. of summary.)			62 2	