CAMPAIGN FINANCIAL DISCLOSURE STATEMENT RECEIVED

For Single-Candidate Committees

120 NAME OF C	ANDIDATE OR COMMITTEE		5 2022				
1. DATE OF REPORT 2.a. NAME OF C.	FRANK BL	isH	WILSON CO.				
2.b. IF COMMITTEE, NAME OF CANDIDATE	INIA' DO	3. ELECTION DATE	LECTION COMMISSION				
2.5. 11 30000000000000000000000000000000000		2022					
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City	State	Zip Code	Phone				
1804 LAKE MEADOW AL MT JU	WET TN	37/22 (615)	7141-8775				
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City	State	Zip Code	Phone				
OFFICE SOUGHT (include district number, if applicable)	6. NAME OF POLITICAL	FREASURER (may be car	ndidate)				
Comm 15510 NFR DIST 8	FRANK E	BUSH					
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD FOURTH OUARTER QUARTER QUARTER QUARTER	PRE-PRIMARY GENERAL 8.b. ENDING DATE OF REPO	MID-YEAR SUPPLEMENTAL PTING PERIOD	YEAR-END SUPPLEMENTAL				
8.a. BEGINNING DATE OF REPORTING PERIOD	6.5. ENDINGENTED 12.30						
9. (Check one)	Q 30 &	du .					
 a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period. 							
10. I/we do solemnly swear or affirm that the information contained accurate accounting of campaign contributions and expenditure Financial Disclosure Act. Additionally, I/we swear or affirm that benefit of the candidate or for any other nonpolitical purpose as signature of candidate	es required to be reported by the no campaign contributions have defined by the federal internal	e candidate committee by re been expended for the	the Campaign				
11. WITNESS SIGNATURE Carol K. Bush 7/5/23 signature of witness	Carolt	Bush ture of witness	7/5/22 date				
12. SUMMARY	20100	/					
a. BALANCE ON HAND LAST REPORT	REPORT	\$Ø					
		\$ 3321,37					
b. TOTAL RECEIPTS THIS PERIOD		•					
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ 3241.21	<i>d</i>				
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)			$\underline{\hspace{1cm}}\psi$				
e. TOTAL LOANS OUTSTANDING		\$ _	φ				
f. TOTAL OBLIGATIONS OUTSTANDING		\$ -	ø				





SUMMARY PAGE - CANDIDATE

14. REPORT COVERING 13. NAME OF CANDIDATE OR COMMITTEE (In Full) FROM: 4/24/2 MUSH FRANK 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.)\$ 17. INTEREST RECEIVED THIS REPORTING PERIOD\$ **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) Total of Expenditures (\$100 or less each payee)\$ 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)\$ b. Itemized Obligations Outstanding (Over \$100 each) c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	TO: 6/30/22						
	Amount						
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	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name R+W MINTING Address P. G. BOX 930		PRIMING/ MAILING		714 19			
Address P. G. BOX	930		4 4 4 7	WING.	12100		
City MT JULIET	State TN	Zip Code 37121	VV) 6.	5101149			
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 Nama	Middle Name		Purpose of Expenditure	Amount of Expenditure			
THOUSE		,,		·			
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					
 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.)			724.69		



JUL - 5 2022

ITEMIZED STATEMENT OF LOANS - CANDIDATE VILSON COUNTY

1. NAME OF CANDIDATE OR COMMITTEE							2. REPORT COVERING THE PERIOD FROM: TO: /		
FRANK BUSH						4	FROM: 1/24/22 6/30/22		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)									
Complete the Following for the Source of the Loan									
First Name RANK Middle Name	First Name Middle Name Outstanding L			f Period)	Loans Received	d Pay	nents	Outst	anding Loan Balance (End of Period)
Last Name/Organization Name 2.596				724,	69 33	3321.37			
Address 1804 LAKE MEADOW K Primary City State Zip Code				☐ General	Election	Date of Loa	4	2 7	
MY JULIET ITA	37/2			Primary Election General Election Runoff (Local Elections Only)					
List All Endorse		ntors fo	r Above Loai		ce is needed	please attach	a page)	Middle	James
First Name	First Name Middle Name			First Name				IVIQUIC	varrie
Last Name/Organization Name			Last Name/Organization Name						
Address				Address					
City	State	Zip Co	de	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/Organization Name							
Address			Address						
City	State	Zip Co	de	City				State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
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				Zip Code	
Amount Guaranteed Outstanding				Arnount Guara	nteed Outstand	ding			
irst Name Middle Name		First Name Middle Name					Name		
Last Name/Organization Name		Last Name/Organization Name							
Address		Address							
City	State	Zip Co	de	City				State	Zip Code
Amount Guaranteed Outstanding				Amount Guara	nteed Outstan	ding			
4. Totals for all Loans (complete on last page of itemized loans)		Children S. Co.		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.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)		(Beginning		Received 724.4		nents 21,37	(End of Period)		