CAMPAIGNEINANCIAL DISCLOSURE STATEMENT

47 5 2015

For State and Local Candidates
For Single-Candidate Committees

THE OF SERVICE WILL AND A STREET OF SERVICE AND A STRE	1 -					
1. DATE OF REPOSESSION COMMISSION	2.a. NAMEOFCA Beiling	andidate or committee e As 4 Fsa Mi	Cyon	(Mayor)		
2.b. IF COMMITTEE, NAME OF CANDIDATE BORNE IN			3. ELECTION	DATE S		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	Clair				
3155 Leeville Ph	Lebaum	State Tu	Zip Code 37090	Phone 615-804-4133		
4.b. CANDIDATE'S HOME ADDRESS (if differen Street or Rural Route	t than 4.a.) City	State	Zip Code	Phone		
OFFICE SOUGHT (include district number, if applicable) NAME OF POLITICAL TREASURER (may be candidate)						
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	FOURTH QUARTER	PRE- PRE- PRIMARY GENERAL	MID-YEA SUPPLEMEN			
Jan 16, 2016		8.b. ENDINGDATE OF REPO		,		
9. (Check one)		Jour City	31,201	φ		
 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 in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.						
signature of candidate	4-5-16 date	signature of	f political treasure	er date		
11. WITNESS SIGNATURE	**************************************					
Carol Do divar signature of witness	4-5-16 date	Saig My signatu	YEM VIT ure of Witness	<u> 4-5-14</u>		
12. SUMMARY		-				
a. BALANCE ON HAND LAST REPORT			\$	***************************************		
b. TOTAL RECEIPTS THIS PERIOD			\$ 5700°	· ·		
c. TOTAL DISBURSEMENTS THIS PERIOD			s <u>994</u>	· · · · · · · · · · · · · · · · · · ·		
d. BALANCE ON HAND (12.a. plus 12.b. mi	nus 12.c.)		,,,	* 4706°°°		
e. TOTAL LOANS OUTSTANDING				\$ 5000°°°		
f. TOTAL OBLIGATIONS OUTSTANDING				\$		



SUMMARY PAGE - CANDIDATE

APR 5 2016

WILSON COUNTY

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT CO	veringthe period	
	FROM: 1-16-16	TO: 3-31-16	
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)			
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 100 °C		
b. Itemized Contributions (over \$100 from each source this period)	\$ 600 °°		
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$ 700 00	
16. LOANS RECEIVED THIS REPORTING PERIOD		\$ 5000 °C	
17. INTEREST RECEIVED THIS REPORTING PERIOD			
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$ <u>570.57</u>	
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)	
T Shruts \$391 55	<u></u>		
Polo Shints 8 30 00	0		
Web Pesigw \$ 572 5	6		
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\$			
\$	***************************************		
\$	<u>.</u>		
<u> </u>			
\$	· · · · · · · · · · · · · · · · · · ·		
Total of Expenditures (\$100 or less each payee)	s 30 og		
b. Itemized Expenditures (Over \$100 each payee this period)	1111 00		
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	act of	994 00	
20. LOAN REPAYMENTS MADE THIS PERIOD		\$ <u>//</u>	
21. TOTAL DISBURSEMENTS (add 19.c, and 20.) (must be shown in item 12.c.)			
22. IN-KIND CONTRIBUTIONS	***************************************	\$	
	· À		
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	0.)	\$	
23. OBLIGATIONS	<i>^</i>		
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	n 12.f.)	\$	

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		1. /.		2. REPORT COVE	RING THE PERIOD
Servie Ash FROM: 1-16-16					TO: 3 - 3/ -//
TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor).					0
First Name O /	Middle Na		Contributions totaling more than Contribution Received For:	\$100 from any contributo	Amount of Contribution
Last Name/Organization Name,				General Election	
Belchen			Li Primary Election 1	UPGeneral Election	\$30000
Address 1517 Smith	44 Dn		Runoff (Local Elections Only)		
City Lebason	State	Zip Code 3/087	Date of Contribution		Aggregate This Election
Occupation			3-9-2016		\$ 300 =
Employer Retined					
First Name Ketly	Middle Na	me	Contribution Received For	·	Amount of Contribution
Last Name/Organization Name		Primary Election General Election		\$ 300	
Address 2032 Blue Ribbons Downs		Runoff (Local Elections Only)		300	
city Lebanon	State,	Zip Code 37087	Date of Contribution		Aggregate This Election
Occupation Retined		3-16-	20/6	\$ 300	
Employer Gentina Hour Wealth					
First Name	Middle Name		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			-		
First Name	Middle Nam		Contribution Received For:	g transfer to the second secon	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					
mployer			-		
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3 of next page if additional pages or (If this is the last page of contributions, this amount must be contributed to the contributions of the contribution o					

APR 5 2016

ITEMIZED STATEMENT OF EXPENDITURES -WCANDIDATE

NAME OF CANDIDATE OR COMMITT	EE R		2. f	REPORT COVER	COMMISSION RING THE PERIOD
	Dee	ure Hsh	FRO	DM: 1-16-16	TO: 3-3/-/6
3. TOTAL ITEMIZED CAMPAIGN EXPEN		····			0
4. COMPLETE THE APPROPRIATE ITEMS FO	Note the state of	iya ilima a mirosona qolqoson i olmiyasiildd	tana tangga ang kalanga ang at an	payee during the per	iod)
First Name Jour	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Namer Rysiness Name All Tison Deaugawing Networt		Web Desgu		\$5725	
Address 499 Vance L.					012
city Lebanon	State	Zip Code 37087		gadan senteng er storen et enggant t	
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name SEI			J-Shints		#39150
Address 114 Leiville PL					# 311
Lebanon	State Th	Zip Code 3/687			
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name SET		PL Shints		\$ 30 30	
Address 114 Lervilla Ph					
Lebamon Lebamon	State Tic	Zip Code 37087			
irst Name	Middle Nam	e	Purpose of Expenditure	Purpose of Expenditure	
ast Name/Business Name		***************************************			
Address		· · · · · · · · · · · · · · · · · · ·			
City	State	Zip Code			
irst Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
ddress			-		
ity	State	Zip Code	······		
irst Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name			-		
ddress					
ity	State	Zip Code			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3, of next page if additional pa (If this is the last page of expenditures, this amount r					