	ANCIAL Di or State and Lo r Single-Candid	cal Candidate	es	ATEMENT VAN 25 2
1. DATE OF REPORT		ATE OR COMMITTEE		ELECTION CO 121
1-25-2021	Stephen 6	rodall	3. ELECTION	DATE
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION	3/OA/
4.a. CAMPAIGN ADDRESS AND PHONE	0	Clata		Phone
Street or Rural Route 5152 Trousdale Ferry like	Lebanen	State	Zip Code 37/19/ 1	615-405-9310
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route		State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, Wilson Lovat, Assessor of Plants, CATEGORY OF REPORT (Check one)	if applicable) 6.	NAME OF POLITICAL	TREASURER (m	ay be candidate)
FIRST SECOND THIRD QUARTER QUARTER QUARTER	QUARTER PRIN	RE- PRE- MARY GENERAL	MID-YEA SUPPLEMEI	
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b.	ENDING DATE OF REPO		
9. (Check one)		1-15	· 21	
b. This campaign is required to file a de and/or expenditures total more than 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribut Financial Discosure Act. Additionally I/we benefit of the candidate or for any other no signature of candidate	etailed financial disclosure I \$1,000 for this reporting pe nformation contained in thi ons and expenditures requ	because contributions (incrod.	sclosure report is e candidate com ve been expende I revenue code.	true and that this report is an mittee by the Campaign d for the personal financial
11.) WITNESS SIGNATURE Signature of winess	1.35.31 date	signa	sture of witness	/- <u>/- J5-J1</u>
12. SUMMARY			2001	59
a. BALANCE ON HAND LAST REPORT			s <u>3,906</u>	,
b. TOTALRECEIPTSTHIS PERIOD			\$	
TOTAL BIODURGENENTO TURO PEDIOD			500	00
d. BALANCE ON HAND (12.a. plus 12.b.	minus 12.c.)			s 3,406.59
e. TOTAL LOANS OUTSTANDING				α
f. TOTAL OBLIGATIONS OUTSTANDING.				\$ — /

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD							
Stephen Goodd/	FROM: 10-1-20 TO: 1-15-21							
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.)	\$							
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.)	\$							
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)	\$							
	•							
b. Itemized Expenditures (Over \$100 each payee this period)								
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)								
20. LOAN REPAYMENTS MADE THIS PERIOD	% I							
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)								
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	\ \ \							

SS-1133 (Rev. 4/02)

Page 2 of 7

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	RING THE PERIOD
Stephen Goodull	TO: 1-15-21				
	Amount				
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT		U			
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH ITEMIZ	ZED CONTRIBUTION (C		100 from any contributor	
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			1		
Employer					
First Name	Middle Nam	ne e	Contribution Received For		Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address		_	Runoff Local Election	ns Only)	
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	
Address			Runoff (Local Election	ns Only)	
City State Zip Code			Date of Contribution		Aggregate This Election
Occupation					
			_		
Employer					
First Name	Middle Nam	e	Contribution Received For:		Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address			Runoff (Local Election	ns Only)	
City	State	Zip Code	Date of Contribution	1	Aggregate This Election
Occupation					
Employer /					
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages (If this is the last page of contributions, this amount must	of this form a be shown in i	re used.) tem 15b. of summary.)			Ò



Page <u>3</u> of <u>7</u>

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER			
Stephen booda	1			FROM: 10-1-20	TO: 1-15-21		
,		Amount					
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the state of the state							
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH HEMIA	ZED IN-KIND CONTRIBU	I I ION (in-kind contributions totaling	more than \$100 Holli any col			
First Name	Middle Name		In-Kind Contribution Received For: □ Primary Election □ General Election		Value of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Elections Only)				
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution				
Occupation Employer							
First Name	Middle Na	me	In-Kind Contribution Received Primary Election	d For: General Election	Value of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Elections Only)				
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of Jr-Kind Contribution				
Occupation Employer							
First Name	Middle Na	me	In-Kind Contribution Receive	d For: General Election	Value of In-Kind Contribution		
Last Name/Organization Name		X	Runoff (Local Election	ns Only)			
Address			Date of In-Kind Contribution Aggregate this Election				
City	State	Zip Code	Description of In-Kind Contribution		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Occupation Employer							
	-	_/	L IS IS IN THE Bush		Value of In-Kind Contribution		
First Name	Middle Na	me	In-Kind Contribution Receive Primary Election D	General Election	value of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Election				
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution				
Occupation Employer	•						
First Name	Middle Nan	ne	In-Kind Contribution Receiv	- A	Value of In-Kind Contribution		
Last Name/Organization Name			☐ Primary Election ☐ ☐ Runoff (Local Election	General Election			
Add			Date of In-Kind Contribution	is Othy)	Aggregate this Election		
Address	Tour	7:- 0-4:			30.535.0		
City Cocupation Employer	State	Zip Code	Description of In-Kind Contribution				
Occupation Employer							
5. TOTICITEMIZED IN-KIND CONTRIBUT (Carry forward to item 3. of next page if additional page (If this is the last page of in-kind contributions, this am	es of this form a	are used.) hown in item 22b, of summan	y)		Ø		
(II this is the last page of in-kind continuations, this city			Day	ne 4 of 7	RDA 1159		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	TO: 1-/5.)				
Stephen booda	Amount				
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	0				
4. COMPLETE THE APPROPRIATE ITEMS FOR E	EACH ITEM	IZED EXPENDITURE (e.	xpenditures totaling more than \$100	to any payee during the pe	riod)
First Name	Middle Na	me	Purpose of Expenditure	1 1/ //	Amount of Expenditure
Last Name/Business Name Greenhill Bushettull	High School	Ad for Bash	164 BC 1/	\$ 250.00	
Address 20 N. Greenh: 11 Rd.			Monut, un		
City MT. Juliet	State 77V	Zip Code 37122			
First Name	Middle Na	me	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Wystertown Basherball	atectow	n High School	Purpose of Expenditure Ad far 84 Jana J. & V.)	\$ 250.00
Address 9360 Sparka Pike	1	,	ganatiov!	, , ,	
Watertown	State	Zip Code			
First Name	Middle Nar	ne	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 Nam	е	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			
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		•			\$500.00

ITEMIZED STATEMENT OF LOANS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD FROM: TO:			TO:
Stophen 6 3. COMPLETE THE APPROPRIATE	ouda l	D EACH IT	ENTED LOAD	lae	W 6400	10-	1-20	1-15-21
	N. C.	REACHIII	EMIZED LOAI	N (loans totaling i	nore than \$100	rrom any source du	ring the period)	
Complete the Following for the Source o	f the Loan Middle Name		Outstandin	ng Loan Balance	Loans	Loar	n Outs	standing Loan Balance
Filst Name	INITIAL INC.			ng of Period)	Receive			(End of Period)
Last Name/Organization Name								
Address			Loan Rec	eived For:			Date of Loan	
Addless				ary Election	☐ General	1		
City	State	Zip Code		off (Local Elections		X	(c)	
Li	st All Endorse	rs or Guaran				please attach a	page)	
First Name		Middle Name		First Name		/	Middle	Name
Last Name/Organization Name				Last Name/Or	ganization Na	e		
Address	/			Address	$\overline{}$			
City	1	State	Zip Code	City	/		State	Zip Code
Amount Guaranteed Outstanding		1		Amount Suara	nteed Outstand	ing		
First Name		Middle Name		Figet Name			Middle	Name
THOUTHOUTHO			\	<i>X</i>				
Last Name/Organization Name			\/	Last Name/Or	ganization Nam	e		
Address			X	Address				
City		State	Zip Code	City			State	Zip Code
Amount Guaranteed Outstanding		/		Amobot Guara	nteed Outstand	ing		
First Name	1	Middle Name		First Name			Middl	e Name
Last Name/Organization Name		/		Last Name/Or	gan xation Nam	е		
Address	-/	%		Address	_			
City		State	Zip Code	City		/	State	Zip Code
Amount Guaranteed Outstanding				Amount Guara	nteed Outstand	ing		
First Name		Middle Name		First Name		_	Middle	Name
Last Name/Organization Name				Last Name/Or	ganization Nam	e		
Address				Address			_	-
	-							7: 0.1
City		State	Zip Code	City			State	Zip Code
Amount Guaranteed Outstanding				Amount Guara	nteed Outstand	ing		
4. Totals for all Loans (complete on last page of itemized loans) (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.)				Outstanding L (Beginning		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
(Total outstanding loan balance should also be SS-1132 (Rev. 4/02)	shown in item 1.	Z.e. on front pa	ge.)		Pa	age of	7_	RDA 1159

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	9			2. REPORT COVERING THE PERIOD			
3. COMPLETE THE APPROPRIATE ITEMS F	/		To a series	FROM: /0 -/-		-15-21	
OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
First Name	Middle Na	ame					
Last Name/Business Name			1				
Address				/	ľ		
City	State Zip Code						
Description of Obligation	L						
First Name	Middle Na	ame	T	r -			
Last Name/Business Name			/				
Last rediffe/Dusifiess rearife							
Address							
City	State	Zip Code	1 /				
Description of Obligation							
First Name	Middle Na	me /					
Last Name/Business Name		$\overline{}$	-				
Address							
City	State	Zip Code					
Description of Obligation							
First Name	Middle Na	me					
Last Name/Business Name	1		1				
Address			1				
City	State	Zip Code	1				
Description of Obligation							
First Name	Middle Nar	me		S-12-72-31-31-31			
Last Name/Business Name			-				
Address			-		1		
City	State	Zip Code	1				
Description of Obligation		1				×	
/							
4. TOTALS							
(Total from Outstanding Balance - (End of Period) c in item 23b. on summary page.)	olumn mus	t also be shown					