CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

| DATE OF REPORT | or Single-Ca | indidate (| Committe | 9 0 S | |
|--|---|---|--|-----------------------------------|---|
| 4.3-18 | 2.a. NAMEOF | CANDIDATEOR | COMMITTEE | | |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE | FRIEND | S TO EL | ECT NR | BILL TA | |
| DO P TO CANDIDATE | | | <u> </u> | 3. ELECTION DA | YLOR |
| DR. BILL TAYLOR | | | | | |
| 4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route | City | | | IWAA | 1 <u>\$</u> 2018 |
| 4.b. CANDIDATE'S HOME ADDRESS (If different | |)\/::::= | State | Zip Code | Phone |
| 4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route | nt than 4.a.) | JVICEE | TN | 37075 | 615-824.1743 |
| N/A | City | | State | Zip Code | Phone |
| 5. OFFICE SOUGHT (include district number, it | fandicable | | | | |
| COUNTY COMMISSION NO | | 6. NAME O | F POLITICAL T | REASURER (may b | e candidate) |
| CALEGORY OR REPORT (Check one) | TRICT ! | F.W | ILLIAM | TAYLOF | <u>,</u> |
| FIRST SECOND | | | | | |
| OLIARTED OLIABORE | FOURTH QUARTER | PRE- | PRE- | L_J MID-YEAR | VEAD TO THE |
| 8.a. BEGINNING DATE OF REPORTING PERIOD | GUARIER | PRIMARY | GENERAL | * | YEAR-END SUPPLEMENTAL |
| 8105 01 MAN 16 2018 | İ | 8.b. ENDING | | TING PERIOD | CALL CONTINUES |
| 9. (Check one) a. This campaign is exempt from detailed tures total \$1,000 or less for this report | | MAR | | 2018 | |
| 10. I/we do solemnly swear or affirm that the info accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we sw benefit of the candidate or for any other nonpositional signature of candidate. Signature of candidate. | ormation contained its and expenditures wear or affirm that no olitical purpose as displayed by the state of | n this campaign required to be re o campaign con efined by the fed | financial disciplorated by the confibrations have the confibration of the confibration | peen expended for the venue code. | ind that this report is an by the Campaign ne personal financial 4-3-18 date |
| May b My signature of witness SUMMARY | 4/3/18 date | M | Nay 5 / | MCof witness | 4/3/18 date |
| | | | | | |
| THE ENDE ON HAND LAST REPORT | | | | | |
| b. TOTAL RECEIPTS THIS PERIOD | ***************************** | | ······\$ _ | 1755 55 | |
| | | | ······\$ _ | 1755 58 10 000 00 | |
| TOTAL RECEIPTS THIS PERIOD C. TOTAL DISBURSEMENTS THIS PERIOD | ****************************** | ************ | ···\$ | 10,000 | |
| c. TOTAL DISBURSEMENTS THIS PERIOD | | *************************************** | ·····\$ _ | 10,000 00 240.22 | . 2/ |
| d. BALANCE ON HAND (12.a. plus 12.b. minus | 12.c.) | | \$ _ \$ _ | 10,000 00 240.22 | 1,515 34 |
| d. BALANCE ON HAND (12.a. pius 12.b. minus e. TOTAL LOANS OUTSTANDING | 12.c.) | | s | 10,000 °° 240.22 sl | 20.020 ≌ |
| d. BALANCE ON HAND (12.a. plus 12.b. minus | 12.c.) | | s | 10,000 °° 240.22 sl | 20.020 ₩ |

SUMMARY PAGE - CANDIDATE

| 13. NAME OF CANDIDATE OF COMMITTEE | - |
|--|------------------------------------|
| 13. NAME OF CANDIDATE OR COMMITTEE (In Full) FRIENDS TO ELECT DR. BILL TAYLOTE | 14. REPORT COVERING THE PERIOD |
| | FROM: 1-16-10 TO: 3-31-18 |
| 15. CONTRIBUTIONS (other than loans and interest) | · — |
| a. Unitemized Contributions (\$100 or less from each source this period) | \$ |
| 5. Remized Contributions (over \$100 from each source this period) | · \$ |
| c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15 a and 15 b.) | |
| THIS REPORTING PERIOD | - · · · |
| THIS ILLY ORTHOG PERIOD | _ |
| 18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) | 5 |
| DISBURSEMENTS | \$ 10,000 |
| 19. EXPENDITURES (other than loan payments) | |
| a. Expenditures (\$100 or less each payee this period) (must be listed by category - | |
| - Category - | e.g., printing, postage, gasoline) |
| SUMNER CO REPUBLICAN WOMEN \$ 25 | |
| s 25 | <u> </u> |
| \$ | |
| \$ | |
| \$ | |
| \$ | |
| \$ | |
| \$ | |
| \$ | |
| Total of Expenditures (\$100 or less each payee) | 25.00 |
| b. Itemized Expenditures (Over \$100 each payee this period) | 215 22 |
| c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) | 5_215_ |
| 20. LOAN REPAYMENTS MADE THIS PERIOD | \$ |
| 21. TOTAL DISBURSEMENTS (add 19 c and 20) (must be about 19 c. | 34022 |
| 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) | s <u>240 = </u> |
| | |
| Uniternized in-kind contributions (\$100 or less from each source this period) Itemized in-kind contributions (over \$100 from each source) | \$ |
| b. Itemized in-kind contributions (over \$100 from each source this period) C. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THE PROPERTY. | \$ |
| c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) 23. OBLIGATIONS | \$_& |
| • | |
| a. Uniternized Obligations Outstanding (\$100 or less each) | \$ |
| Outstanding (Over \$100 each) | \$ |
| c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 1 | 2.f.)\$ |
| SS-1133 (Rev. 4/02) | |

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| FRIENDS TO E | RCOMMITTEE | Rul | | 2. REPORT COV | ERING THE PERIOD |
|--|---------------------------|--------------------|---|---------------------|---|
| 2 TOTAL ITTEM | | 1-3144 | TAYLOK | ROM: LILIE | TO: 3-31-18 |
| 4. COMPLETE TO CAMPAI | GN CONTRIBUTIONS F | ROM PRECEDIN | IC DACE / | | Amount |
| 4. COMPLETE THE APPROPRIA | ITE ITEMS FOR EACH ITE | MIZED CONTRIBU | TION (contributions totaling more than \$100) | O from c==== | 1 6 |
| rusi Name | Middle I | Vame | Contribution Received For: | o nom any contribut | |
| Last Name/Organization Name | <u></u> | | | | Amount of Contribution |
| | | | Primary Election G | Seneral Election | |
| Address | | | | | |
| City | | | Runoff (Local Elections O | Only) | |
| City | State | Zip Code | Date of Contribution | | Accessed This File |
| Occupation | | | | | Aggregate This Election |
| | | | | | |
| Employer | | | | | |
| . | | | į | | |
| First Name | Middle N | Ame | Co-table 5 | | <u> </u> |
| art Nama (Constitution) | | | Contribution Received For: | | Amount of Contribution |
| ast Name/Organization Name | | | Primary Election | eneral Election | |
| Address | · | | | | 1 |
| | | | Runoff (Local Elections On | ıly) | |
| City | State | Zip Code | Date of Contribution | | |
| ccupation | | | Date of Contribution | | Aggregate This Election |
| ссорацоп | | - | | | |
| | | | | | |
| mployer | | | | | |
| mployer | | | | | |
| | | | | | |
| rst Name | Middle Nam | e | Contribution Received For: | | Amount of Contribution |
| rst Name | Middle Nam | e | | | Amount of Contribution |
| rst Name st Name/Organization Name | Middle Nam | e | | neral Election | Amount of Contribution |
| rst Name st Name/Organization Name | Middle Nam | e | Primary Election Gen | 1 | Amount of Contribution |
| rst Name St Name/Organization Name dress | | | Primary Election Gen | 1 | Amount of Contribution |
| rst Name st Name/Organization Name dress | Middle Nam State | Zip Code | Primary Election Gen |) | |
| rst Name st Name/Organization Name dress | | | Primary Election Gen |) | Amount of Contribution Aggregate This Election |
| rst Name st Name/Organization Name dress y | | | Primary Election Gen |) | |
| rst Name st Name/Organization Name dress y | | | Primary Election Gen |) | |
| rst Name St Name/Organization Name dress y supation okoyer | State | Zip Code | Primary Election Gen |) | |
| rst Name st Name/Organization Name dress y supation bloyer | | Zip Code | Primary Election Gen | | Aggregate This Election |
| rst Name st Name/Organization Name dress y supation bloyer | State | Zip Code | Primary Election Gen Runoff (Local Elections Only Date of Contribution Contribution Received For: |) | |
| rst Name st Name/Organization Name dress y cupation ployer t Name Name/Organization Name | State | Zip Code | Primary Election Gen |) | Aggregate This Election |
| rst Name st Name/Organization Name dress y cupation ployer t Name Name/Organization Name | State | Zip Code | Primary Election Gen Runoff (Local Elections Only Date of Contribution Contribution Received For: Primary Election General | ral Election | Aggregate This Election |
| st Name/Organization Name dress y cupation bloyer t Name Name/Organization Name | State Middle Name | Zip Code | Primary Election Gen Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Runoff (Local Elections Only) | ral Election | Aggregate This Election |
| st Name/Organization Name dress y cupation bloyer t Name Name/Organization Name | State Middle Name | Zip Code | Primary Election Gen Runoff (Local Elections Only Date of Contribution Contribution Received For: Primary Election General | ral Election | Aggregate This Election Amount of Contribution |
| st Name/Organization Name dress y zupation bioyer t Name Name/Organization Name | State Middle Name | Zip Code | Primary Election Gen Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Runoff (Local Elections Only) | ral Election | Aggregate This Election |
| rst Name sst Name/Organization Name rdress y supation Name/Organization Name ress | State Middle Name | Zip Code | Primary Election Gen Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Runoff (Local Elections Only) | ral Election | Aggregate This Election Amount of Contribution |
| rst Name st Name/Organization Name dress y cupation Dioyer t Name Name/Organization Name | State Middle Name | Zip Code | Primary Election Gen Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Runoff (Local Elections Only) | ral Election | Aggregate This Election Amount of Contribution |
| rst Name st Name/Organization Name diress y cupation bloyer t Name Name/Organization Name ress | State Middle Name | Zip Code | Primary Election Gen Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Runoff (Local Elections Only) | ral Election | Aggregate This Election Amount of Contribution |
| st Name/Organization Name dress y zupation Dioyer t Name Name/Organization Name ress | State Middle Name State | Zip Code Zip Code | Primary Election Gen Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Runoff (Local Elections Only) | ral Election | Aggregate This Election Amount of Contribution |
| st Name st Name/Organization Name dress y zupation Name Name/Organization Name ress | State Middle Name State | Zip Code Zip Code | Primary Election Gen Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Runoff (Local Elections Only) | ral Election | Aggregate This Election Amount of Contribution |

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

| FRIENDS TO | ELEC | T D | R. BILL | TAYING 2 PROPERTY | ORT COVERING THE PERIOD |
|--|-----------|-------------|--------------------|---|---|
| 3. TOTAL ITEMIZED INLKIND | CONTRIB | UTIONS | | TAYCOL FROM: | 1-16-18 TO: 3-31-18 |
| 4. COMPLETE THE APPROPRIA | TE ITEMS | OP EACH | ROM PRECEDING | G PAGE (enter \$0 if first itemized page) | Amount |
| First Name | TENO, | OK EACH (| I EMIZED IN-KIND C | 5 PAGE (enter \$0 if first itemized page) CONTRIBUTION (in-kind contributions totaling more than \$1) | 00 from any contributor during the perfort) |
| | | Midd | lle Name | In-Kind Contribution Received For | 111 |
| Last Name/Organization Name | | | | Primary Election General | Value of In-Kind Contribut |
| Address | | | | Runoff (Local Elections Only) | |
| | | | | Date of in-Kind Contribution | Aggregate this Election |
| City | | State | Zip Code | Description of In-Kind Contribution | Walk offices may Emechaly |
| Occupation | Emplo | yer | L | | |
| | | | | 1 | |
| -irst Name | | 3840 | | | |
| and Name 10 | | Middle | a Name | in-Kind Contribution Received For: | Value of in-Kind Contribution |
| ast Name/Organization Name | | | | Primary Election General El | ection |
| ddress | | | | Runoff (Local Elections Only) | |
| ity | | | | Date of in-Kind Contribution | Aggregate this Election |
| | | State | Zip Code | Description of In-Kind Contribution | |
| ccupation | Employe | x | | | |
| ······································ | 1 | | | 1 | |
| rst Name | | Middle | Name | | |
| st Name/Organization Name | | | | In-Kind Contribution Received For: Primary Election General Fle | Value of In-Kind Contribution |
| | | | | | ction |
| dress | | | | Runoff (Local Elections Only) | |
| y | | | | Date of In-Kind Contribution | Aggregate this Election |
| × palion | | State | Zip Code | Description of tn-Kind Contribution | |
| - Aprilia Company | Employer | | | | |
| | <u> </u> | | | | |
| t Name | | Middle N | ame | In-Kind Contribution Received For: | |
| Name/Organization Name | | | | Primary Election General Elect | Value of In-Kind Contribution |
| | | | | | Joh |
| TOSS . | | | | Date of in-Kind Contribution | |
| | | State | 70.0 | | Aggregate this Election |
| pation | | 10000 | Zip Code | Description of In-Kind Contribution | |
| | Employer | | | *************************************** | |
| ame | | | | | |
| | | Middle Nam | 9 | In-Kind Contribution Received For: | No. |
| ime/Organization Name | | <u> </u> | | Primary Election General Election | Value of In-Kind Contribution |
| s - | | | | Runoff (Local Elections Only) | |
| = | | _ | | Date of In-Kind Contribution | Accordant this Charle |
| | | State | Zip Code | Description of In 17 - 40 | Aggregate this Election |
| | İ | | · · | Description of In-Kind Contribution | |
| tion | Employer | | | ⊣ | ſ |
| | Employer | | | 7 | ĺ |
| OTAL ITEMIZED IN-KIND CON | TRIBUTION | VS | | | |
| DTAL ITEMIZED IN-KIND CON any forward to item 3. of next page if add this is the last page of in-kind contribution | TRIBUTIO | | used.) | | |

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

| | ELECT DR | BILL . | TAYLOR | į from; | COVERING THE PERIOD TO: |
|--|------------------------------------|--------------------|--|--------------------------|--|
| 3. TOTAL ITEMIZED CAMPAI | GN EXPENDITURES | FROM DOCCEDIA | 0.51.07.1 | | Amount |
| 4. COMPLETE THE APPROPRIA | TE ITEMS FOR EACH I | TEMIZED EXPENDIT | G PAGE (enter \$0 if first itemized URE (expenditures lotaling more than \$ | page) | |
| First Name | Midd | le Name | ONL (experiorities lotaling more than \$ | \$100 to any payee durin | ng the period) |
| Lest Name/Business Name | | | Purpose of Expenditure | | Amount of Expenditure |
| | 47) NP | | PRINTIN | 5 | 23 |
| I Augress | | | | | \$215 ²² |
| 116 IMPERIA | C DLOD | | | | |
| HENDERSONVIL | LE TM | Zp Code 3 7 D75 | | | Ī |
| First Name | | Name | | | |
| Last Name/Business Name | | | Purpose of Expenditure | | Amount of Expenditure |
| Lost (tarrerousiness Name | | | | | |
| Address | | | | | |
| City | | |] | | |
| - | State | Zip Code | 7 | | |
| irst Name | | | | | |
| | Middle | Name | Purpose of Expenditure | | Amount of Expenditure |
| ast Name/Business Name | | | | | A CONTROL OF EXPENDING |
| ddress | | | _ | | |
| | | | | | j |
| ity | State | Zip Code | | | |
| | | | | | |
| rst Name | Middle N | 3/ne | Purpose of Expenditure | | |
| st Name/Business Name | | | Capes of Experiordie | | Amount of Expenditure |
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| dress | | | _ | | |
| | Stale | Zio Codo | | | |
| dress | Stale | Zip Code | | | |
| dress | | · | | | |
| dress / t Name | State Middle Nar | · | Purpose of Expenditure | | Amount of Expenditure |
| dress | | · | Purpose of Expenditure | | Amount of Expenditure |
| dress / t Name | | · | Purpose of Expenditure | | Amount of Expenditure |
| dress , t Name Name/Business Name | Middle Nar | ne | Purpose of Expenditure | | Amount of Expenditure |
| dress , t Name Name/Business Name | | · | Purpose of Expenditure | | Amount of Expenditure |
| dress , t Name Name/Business Name | Middle Nar | Tip Code | | | Amount of Expenditure |
| t Name Name/Business Name ress | Middle Nar | Tip Code | Purpose of Expenditure Purpose of Expenditure | | Amount of Expenditure Amount of Expenditure |
| t Name Name/Business Name | Middle Nar | Tip Code | | | |
| t Name Name/Business Name ress | Middle Nar | Tip Code | | | |
| t Name Name/Business Name ress Name | Middle Nar | Tip Code | | | |
| t Name Name/Business Name ress Name | Middle Nar | ne Zip Code | | | |
| t Name Name/Business Name ress Name Name/Business Name | Middle Nar State Middle Narn State | Zip Code | | | |
| t Name Name/Business Name ress Name | State Middle Nam Middle Nam | Zip Code | | | |

ITEMIZED STATEMENT OF LOANS - CANDIDATE

| 1. NAME OF CANDIDATE OF | R COMMITTE | ΞE | | | | | To ==== | | |
|---|-----------------|-----------------|--------------|-----------------------|---|---------------------------------------|---------------|--|---|
| FRIENDS TO | e file | / T: | | | | | I FR()Ms. | | VERING THE PERIO |
| 3. COMPLETE THE APPROP | RIATE ITEM | S FOR FA | CH ITEM | 25010A | JVAF DE | 2 | 1-1 | 6-18 | 3-31-1 |
| Complete the Following for the So | | -, -,, | JITTI EMIZ | LED LUA | IV (loans totaling mo | re than \$100 from any | source during | the period |) |
| hirst Name | Middle I | | | | | | | | |
| F. WILLIAM | , words t | terine | | Outstandi (Beninni | ing Loan Balance ing of Period) | Loans | Loan | | Outstanding Loan Balance |
| F. WILLIAM Last Name/Organization Name | ·L | | | _ | 2 - 00 | Received | Payments | | (End of Period) |
| TAYLOR | | | | 1110 | 200 | 10,000 | 8 | 1 2 | BO, O20 💆 |
| 200 OAK HI | | | ļ | Loan Reci | elved For: | | Date | of Loan | |
| City | State | Zin Code | | Prim | ary Election [| General Election | | | |
| HENDERSONVILL | E TW | Zip Code 37c | 75 | Runc | off (Local Elections Onl | y) | ح" | 3-2 | 4-17 |
| | List All End | orsers or Gu | uarantors fo | ar Above Lo | oan (If more space | is needed shees | | ······ | |
| First Name | | Middle Na | ime | | First Name | is needed please a | illach a page | | |
| ast Name/Organization Name | | | | | | | | Mid | die Name |
| | | | | | Last Name/Organi | zation Name | | | |
| Address | | | | | Address | | | | |
| City | | | | | | | | | |
| | | State | Zip Cod | le | City | · · · · · · · · · · · · · · · · · · · | | Stat | Zip Code |
| mount Guaranteed Outstanding | | | | | Amount Guaranteed | 10.4. | | | |
| irst Name | | | | | Chount Gravaniest | Outstanging | | | |
| | | Middle Nan | ne | | First Name | · · · · · · · · · · · · · · · · · · · | | Midd | le Name |
| st Name/Organization Name | | | | | | | | | |
| | | | | | Last Name/Organiza | ation Name | - | | · · · · · · · · · · · · · · · · · · · |
| ddress | · | | | | Address | | | | |
| ity | | 1 80-1 | | - | | | | | |
| | | State | Zip Code | 1 | City | | | State | Zlp Code |
| ount Guaranteed Outstanding | | | <u> </u> | | Amount Guaranteed | Dutstanding | | | |
| st Name | | 1010.1 | | | | | | | |
| | - | Middle Name | • | | First Name | | | Midd | e Name |
| Name/Organization Name | | | | | Last Name/Organizat | ion Nama | | | - |
| ress | | | | | | OII HERING | | | |
| | | | | 7 | Address | | | | |
| , | | State | Zip Code | | City | | | | |
| uni Guaranteed Outstanding | | | <u> </u> | | | | | State | Zip Code |
| | | | | A | mount Guaranteed O | utstanding | | ــــــــــــــــــــــــــــــــــــــ | |
| Name | T | Middle Name | | | | | | | |
| Name (Care de la Care | [| | | F | First Name | | | Middle ! | √ame |
| Name/Organization Name | | | | - L | ast Name/Organizatio | n Name | | 1 | |
| ess | | | | | | | | | |
| | | | | JAC | ddress | | | | · · · · · · · · · · · · · · · · · · · |
| | s | tate | Zip Code | a | ity | | | 1 | |
| nt Guaranteed Outstanding | | | | | Tourist Character 1 | | | State | Zip Code |
| | | | | | nount Guaranteed Out | standing | | | |
| -1-6 | | _ | | | | | | | |
| tals for all Loans (complete on las | | | ;) | Ou | Itslanding Loan Balan | i loone | | | |
| tals for all Loans (complete on las I loans received should also be shown in it I loan payments should also be shown in it I outstanding loan balance should also be s | lem 16. on sumr | mary page.) | | Ou | Islanding Loan Balan (Beginning of Period) | ce Loans Received | Loan Payme | nts | Outstanding Loan Balance (End of Pariod) |

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

| 1.3 COMPLETE THE | DMMITTEE | D R | | 2. REPORT CO | VERING THE PE | RIOD |
|--|------------------------------|---|---------------------------------------|---------------------------|---------------|---|
| 3. COMPLETE THE APPROPRIA OBLIGATION (obligations totali | TE ITEMS FOR EA | CHITEMETER | TAYLOR | TEROM: 1-4. | 18 TO | 3-31-18 |
| OBLIGATION (obligations total) | | Owed to any | Outstanding Balance | Debt Incurred | Payments | Outstanding Balan |
| person/vendor at the end of the | reporting period) | onou to arry | (Beginning of Period) | This Period | This Period | (End of Period) |
| First Name | | | | | 1 | (====================================== |
| · | Middle | Name | | | | |
| Last Name/Business Name | | | | | ļ. | 1 |
| Address | | | } | ! | | |
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| Description of Obligation | | 20 Code | | | | ! |
| Oceanipulos of Obligation | | ~ ~ | | | | |
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| escription of Obligation | | | <u> </u> | | | |
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| st Name/Business Name | | | 1 | | | |
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| scription of Obligation | | L | | 1 | 1 | |
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| st Name | Middle Name | • | i l | | | |
| st Name Name/Business Name | Middle Name | e | | | | |
| Name/Business Name | Middle Name | | | | | |
| | Middle Name | | | | | |
| Name/Business Name | | | | | | |
| Name/Business Name ess | | Zīp Code | | | | |
| Name/Business Name | | | | | | |
| Name/Business Name ess ess cription of Obligation | | | | | | |
| Name/Business Name ess | | | | | | |
| Name/Business Name ess ription of Obligation | State | | | | | |
| Name/Business Name ess ess cription of Obligation | State | | | | | |
| Name/Business Name ess ription of Obligation | State | | | | | |
| Name/Business Name ess ription of Obligation Name | State | | | | | |
| Name/Business Name ess ription of Obligation Name | State Middle Name | | | | | |
| Name/Business Name ess cription of Obligation Name tame/Business Name | State Middle Name State Zi | Zīp Code | | | | |
| Name/Business Name ess ription of Obligation Name | State Middle Name | Zīp Code | | | | |
| Name/Business Name ess cription of Obligation Name lame/Business Name ss | State Middle Name State Z | Zip Code | | | | |
| Name/Business Name ess cription of Obligation Name tame/Business Name | State Middle Name State Z | Zip Code | | | | |