CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

	Halatto Tolillini							
	candidate or committee Dline S. Kruege							
2.b. IF COMMITTEE, NAME OF CANDIDATE	onno o. radoga	3. ELECTION DA						
Committee to Elect Caroline S. Krueger 5/1/2018								
<u> </u>	3. Muegei	3/1/	2010					
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone								
121 Windham Circle Hendersor	·	•	615-482-0733					
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route . City	State	Zip Code	Phone					
5. OFFICE SOUGHT (include district number, if applicable) 6. NAME OF POLITICAL TREASURER (may be candidate)								
County Commission, 10th District F. William Taylor, III								
7. CATEGORY OR REPORT (Check one)		_						
EZ	PRE-PRE-	L.I MID-YEAR	L.) YEAR-END					
QUARTER QUARTER QUARTER	PRIMARY GENERA	L SUPPLEMENT						
8.a. BEGINNING DATE OF REPORTING PERIOD 1/16/2018	8.b. ENDING DATE OF RE 3/31/2018							
9. (Check one)	3/31/2010)						
a. This campaign is exempt from detailed disclosure beca	use contributions (including i	n_kind) received total \$	1 000 or less AND expendi-					
tures total \$1,000 or less for this reporting period. (Co			1,000 of less AND expendit					
b. This campaign is required to file a detailed financial dis	cheure hecause contribution	e (including in-kind) sec	200 P2 nedt enom letot bevier					
and/or expenditures total more than \$1,000 for this rep		s (microung m-kmb) rec	cived total filore triair \$1,000					
I/we do solemnly swear or affirm that the information contain accurate accounting of campaign contributions and expenditu Financial Disclosure Act. Additionally, I/we swear or affirm the benefit of the candidate or for any other nonpolitical purpose.	res required to be reported bat no campaign contributions	y the candidate commi have been expended t	ttee by the Campaign					
mid in a large	1	a /						
1 / W / W / W 3/31/2018	1.6	sella H	3/31/2018					
signature of candidate date	signatu	re of political treasurer,	date					
11. WITNESS SIGNATURE	. 81							
3/31/2018	stip	hance ittia	nol 3/31/2018					
signature of witness date	^r si	gnature of witness	date					
12. SUMMARY								
a. BALANCE ON HAND LAST REPORT		<u>\$ 178.62</u>						
b. TOTAL RECEIPTS THIS PERIOD		30						
		178.92						
c. TOTAL DISBURSEMENTS THIS PERIOD	***************************************	\$						
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)			\$ <u>0</u>					
e. TOTAL LOANS OUTSTANDING			<u>\$</u> 0					
F TOTAL ORI CATIONS OF TSTANDING			s <u>0</u>					
f. TOTAL OBLIGATIONS OUTSTANDING	***************************************		⊅					



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT COV	ERING THE PERIOD				
Committee to Elect Caroline S. Krueger		FROM: 1/16/2018	^{TO:} 3/31/2018				
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)							
a. Unitemized Contributions (\$100 or less from each source this p	eriod)	\$. <u>30</u>	_				
b. Itemized Contributions (over \$100 from each source this period))	\$	_				
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 1	5.a. and 15.b.)	••••••	\$				
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ 0						
17. INTEREST RECEIVED THIS REPORTING PERIOD	***************************************		\$ 0				
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in iter	m 12.b.)	•••••	\$.30				
DISBURSEMENTS							
19. EXPENDITURES (other than loan payments)							
a. Expenditures (\$100 or less each payee this period) (must be listed	d by category - e	e.g., printing, postage,	gasoline)				
Data	\$ <u>50.00</u>						
Printing	\$ 95.42						
Postage	\$ 33.50						
	\$						
	\$						
	\$						
	\$	····	:				
	\$						
	\$		İ				
	Ψ		:				
Total of Expenditures (\$100 or less each payee)	••••••	\$ 178.92	_				
b. Itemized Expenditures (Over \$100 each payee this period)	·····	\$ <u>0</u>	_				
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a.	and 19.b.)		\$ 178.92				
20. LOAN REPAYMENTS MADE THIS PERIOD			\$ 0				
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in	item 12.c.)		\$ 178.92				
22.IN-KIND CONTRIBUTIONS							
a. Unitemized in-kind contributions (\$100 or less from each source th	is period)	\$ <u>0</u>	_				
b. Itemized in-kind contributions (over \$100 from each source this pe	riod)	\$ <u>0</u>	_				
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (ad	d 22.a. and 22.b	0.)	\$ <u>0</u>				
23. OBLIGATIONS							
a. Unitemized Obligations Outstanding (\$100 or less each)	••••••••••	\$0					
b. Itemized Obligations Outstanding (Over \$100 each)		\$ <u>0</u>	_				
. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$							

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	ING THE PERIOD							
Committee to Elect Ca	T0:3/31/2018							
	Amount							
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT								
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH ITEMIZ	ED CONTRIBUTION (c	ontributions totaling more than \$	100 from any contributor				
First Name)	Contribution Received For:		Amount of Contribution				
Last Name/Organization Name	I	· · · · · · · · · · · · · · · · · · ·	☑ Primary Election ☐	General Election				
Address			Runoff (Local Election	s Only)				
City	Zip Code	Date of Contribution		Aggregate This Election				
Occupation								
Employer								
First Name	Middle Nam	9	Contribution Received For:		Amount of Contribution			
Last Name/Organization Name	•		Z Primary Election	General Election				
Address			Runoff (Local Election	s Only)				
City	Zip Code	Date of Contribution		Aggregate This Election				
Occupation								
Employer								
First Name	Mirke Name		Contribution Received For:		Amount of Contribution			
First Name Middle Name			Contribution Received For.		Amount of Continuing			
Last Name/Organization Name			Primary Election	General Election				
Address			Runoff (Local Election					
City	State	Zip Code	Date of Contribution		Aggregate This Election			
Оссираtion		-						
Employer				į				
First Name	Middle Name)	Contribution Received For:		Amount of Contribution			
Last Name/Organization Name								
Last Name/Organization Name	l		Primary Election	General Election				
Last Name/Organization Name Address	<u> </u>		Primary Election					
	State	Zip Code			Aggregate This Election			
Address	State	Zip Code	Runoff (Local Election		Aggregate This Election			
Address City	State	Zip Code	Runoff (Local Election		Aggregate This Election			
Address City Occupation	State	Zip Code	Runoff (Local Election		Aggregate This Election			
Address City Occupation			Runoff (Local Election		Aggregate This Election			

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR CO										
Committee to Elect Caroline S. Krueger FROM: /16/2018										
3 TOTAL ITEMIZED INLKIND COM	A	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 period)										
4. COMITETE THEAT ROPRIATE IT	LM3 FOR EACI	1 I I C.WILZ.	ED IN-AIND CONTRIBO			moutor during the period)				
First Name Middle Name			In-Kind Contribution Received		Value of In-Kind Contribution					
Last Name/Organization Name				l _						
				Runoff (Local Election	is Uniy)					
Address			Date of In-Kind Contribution		Aggregate this Election					
City State Zip Code			Description of In-Kind Contribution							
Occupation Employer										
First Name	M	liddle Nam	e	In-Kind Contribution Received	•••	Value of In-Kind Contribution				
Last Name/Organization Name		· · · · · ·		1 = '						
,	 	· · · · · · · · · · · · · · · · · · ·		Runoff (Local Election	General Election s Only) Aggregate this Election For: Value of In-Kind Contribution					
Address				Date of In-Kind Contribution		Value of In-Kind Contribution Aggregate this Election Value of In-Kind Contribution eral Election Value of In-Kind Contribution				
City	S	State	Zip Code	Description of In-Kind Contribution						
Occupation	Employer									
First Name	М	fiddle Nam	e	In-Kind Contribution Received	l For:	Value of In-Kind Contribution				
Last Name/Organization Name				Primary Election	General Election					
Last Name Organization Name			Runoff (Local Election	s Only)						
Address				Date of In-Kind Contribution		Aggregate this Election				
City	State Zip Code			Description of In-Kind Contribution		W				
Occupation	Employer									
First Name	М	liddle Name	- e	In-Kind Contribution Received	i For:	Value of In-Kind Contribution				
Last Name/Organization Name				Primary Election	General Election					
Coot warray organization regard				Runoff (Local Election	s Only)					
Address				Date of In-Kind Contribution		Aggregate this Election				
City	S	tate	Zip Code	Description of In-Kind Contribution						
Occupation	Employer		<u> </u>							
First Name	Mi	iddle Name	:	In-Kind Contribution Receive	d For:	Value of In-Kind Contribution				
I and a second of the second o					General Election					
Last Name/Organization Name				Runoff (Local Elections	s Only)					
Address			Date of In-Kind Contribution	· · · · · · · · · · · · · · · · · · ·	Aggregate this Election					
City	St	ate	Žip Code	Description of In-Kind Contribution	· ·					
Occupation	Employer					į				
5. TOTAL ITEMIZED IN-KIND CO	NTRIBUTIONS	3								
(Carry forward to item 3. of next page if additional pages of this form are used.)						0				
(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)										

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	ING THE PERIOD					
Committee to Elect Ca						
2 TOTAL ITEMIZED CAMPAIGN EVERNOUT	Amount					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU						
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEMI	ZED EXPENDITURE (ex	conditures totaling more than \$100	to any payee during the pen	od)	
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Sumner County Election	n Comm	ission			50.00	
Address			Data		00.00	
City	State	Zip Code				
rst Name Middle Name			Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	<u> </u>					
Address				:		
City	State	Zip Code				
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	· · · · · · · · · · · · · · · · · · ·		ter \$0 if first itemized page) itures totaling more than \$100 to any payee during the period) urpose of Expenditure Data Amount of Expenditure			
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	8	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middle Nam	e	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 of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)						

ITEMIZED STATEMENT OF LOANS - CANDIDATE

							2. REPORT COVERING THE PERIOD						
Committee to Elect Caroline S. Krueger							I	ROM: 16/2018		TO: 3/3	1/2018		
3. COMPLETE THE APPROPR						nore than \$10			eriod)	5,0	1/2010		
Complete the Following for the Sou	rce of the Loan												
First Name	Middle Nam	ie		Outstanding L (Beginning o		Loans Receive		Loan yments	Outs		g Loan Balance of Period)		
Last Name/Organization Name								, .		1.	•••••••••		
Address Loan Recei					ed For		J	Date of Lo	<u></u>				
Autores	Idress Loan Receive				☐ Genera	l Election	Date of the	alı					
City	State	Zip Code		'	Runoff (Local Elections Only)								
	List All Endon	sers or Guara	intors fo	or Above Loa	n (If more spa	ice is neede	d please attac	n a page)					
First Name		Middle Name	1		First Name	•			Middle	Name			
Last Name/Organization Name			·		Last Name/On	ganization Na	me						
Address			•		Address								
City		State	Zip Co	ode	City	-			State		Zip Code		
Amount Guaranteed Outstanding	Amount Guaranteed Outstanding				Amount Guara	nteed Outstar	nding		State Zip Code				
First Name Middle Name				First Name			Middle Name						
Last Neme/Organization Name				Last Name/On	ganization Na	me		Middle Name					
Address				Address									
City		State	Zip Co	ode	City Stake Zip					Zip Code			
Amount Guaranteed Outstanding					Amount Guara	nteed Outstan	nding						
First Name		Middle Name			First Name			Middle Name					
Last Name/Organization Name					Last Name/Organization Name								
Address					Address			·					
City		State	Zip Co	xde	City	.			State	-	Zip Code		
Amount Guaranteed Outstanding					Amount Guara	nteed Outstan	nding		-				
First Name		Middle Name			First Name				Middle	Name	'		
Last Name/Organization Name		<u> </u>			Last Name/Org	ganization Na	me		4				
Address				· · · · · · · · · · · · · · · · · · ·	Address								
City		State	Žip Co	ode	City		<u> </u>		State		Zip Code		
Amount Guaranteed Outstanding					Amount Guara	nteed Outstan	ding		•	,			
4. Totals for all Loans (complete (Total loans received should also be should	on last page of	iternized loa	ns)		Outstanding L		Loans	Los			tanding Loan Balance		
(Total loans received should also be she (Total loan payments should also be she (Total outstanding loan balance should a	own in item 20, on s	summary page.)	}		(Beginning	us Period)	Received 0	O Payr	nents	0	(End of Period)		
,				 	<u> </u>		~			ν.			



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
Committee to Elect				FROM: 1/16/20	18 TO:3/3	31/2018
COMPLETE THE APPROPRIATE ITEMS ITEMS OBLIGATION (obligations totaling more that person/vendor at the end of the reporting person.)		Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
First Name	Middle Na	me				
Last Name/Business Name		··· - · · · · · · · · · · · · · · · · ·	1			
Address			1			
City	State	Zip Code	1			
Description of Obligation	1	4		<u> </u>		
First Name	First Name Middle Name					
Last Name/Business Name	<u> </u>		-			:
Address			1			
City	State Zip Code		1			
Description of Obligation	<u>t </u>	<u> </u>			1	<u></u>
First Name	Middle Name					
Last Name/Business Name			-			
Address			-			
City	State	Zip Code	1			
Description of Obligation		•	- 	·	L	
First Name	Middle Name					
Last Name/Business Name	<u> </u>		-			
Address			-			
City	State	Zip Code	1			
Description of Obligation	1		*			<u> </u>
First Name	Middle Nar	ne				
Last Name/Business Name	1		-			
Address						
City	State	Zip Code	-			
Description of Obligation	<u> </u>		,			
4. TOTALS		Laba ha ch				
(Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)	www.mus	laiso de snown	О	0	o	0