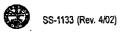
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DA	TEOFREPORT	2.a. NAMEOFC	ANDIDATE OR C	OMMITTEE	instiel	7
2.b. IF	COMMITTEE, NAME OF CANDIDATE	1000	1114	1 1 K	3. ELECTION DATE	<u> </u>
					may	1.2018
	MPAIGN ADDRESS AND PHONE	City		Ctata	Zin Codo	Phone (215 -
) Sii	reet or Rural Route COPPERCIPE	k Gas	detts	State	Zip Code	A 815-0250
	NDIDATE'S HOME ADDRESS (if differen			W· (1 ×	17- 510 / 6	× 0.0 0.00
Str	eet or Rural Route	City		State	Zip Code	Phone
5. OF	FICE SOUGHT (include district number, i		1		TREASURER (may be o	andidate)
115		Ssioner	KePV	er Di	ad(- 1414)	aon
	TEGORY OR REPORT (Check one) FIRST SECOND THIRD UARTER QUARTER QUARTER	FOURTH QUARTER	PRE-	PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
	GINNING DATE OF REPORTING PERIOD	QUARTER			PRTING PERIOD	SOFFELMENTAL
a	PRIL 1.2018		Apr	112	1.2018	
9. (Che	ck one)		•			
a.	This campaign is exempt from detailed tures total \$1,000 or less for this repo	ed disclosure becaus orting period. (Com	se contributions plete items 12d.	(including in-kl , 12e. and 12f.)	nd) received total \$1,000	or less AND expendi-
b. '	This campaign is required to file a de	tailed financial discl	osure because	contributions (ir	ncluding in-kind) receive	d total more than \$1,000
'	This campaign is required to file a de and/or expenditures total more than	\$1,000 for this repor	ting period.			
a Fi	we do solemnly swear or affirm that the in ccurate accounting of campaign contribution	ons and expenditure swear or affirm that	es required to be no campaign c	reported by the	ne candidate committee to ve been expended for the	by the Campaign
b	enefit of the candidate or for any other not	npolitical purpose as	defined by the	federal internal	I revenue code.	
The	Moundle	L1123/18	7,00	by Bl	ack-this	Man 4/22/18
	signature of candidate	date	244	signature o	of political treasurer	date
11. W	ITNESS SIGNATURE					
-	other Man Will	11121.0	<	1	≤ 11	4-24-18
	Months of humas	4 TO 10	_	signa	ture of witness	
	signature bitwiness •	- Cate		(signa	tore of withess	- Valid
12. SU	MMARY				iso ul	
a.	BALANCE ON HAND LAST REPORT				" \$ 1 <u>041.41</u>	
b.	TOTAL RECEIPTS THIS PERIOD	MPH2810M-	⊕ 9-14-0 +T-	EFE0	s 14 121.80	
c.	TOTAL DISBURSEMENTS THIS PERIOD	YTNUO	NMNER C	18	_s_1,336,.3	ス
d.	BALANCE ON HAND (12.a. plus 12.b. r	minus 12.c.) 81.07	<u>↑</u>		\$	1,376.89
e.	TOTAL LOANS OUTSTANDING				\$	-
		U =				a
f.	TOTAL OBLIGATIONS OUTSTANDING	•••••	***************************************	•••••	\$	

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD FROM
PROFIDE	110 119.07.18
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	s <u>100.60</u>
b. Itemized Contributions (over \$100 from each source this period)	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 4121.80
16. LOANS RECEIVED THIS REPORTING PERIOD	_ 1
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>1,121.80</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)
Realblican Party dues \$51.7	15
Votes Goovital 990	
Voie Chavia 17.0	<u></u>
\$	
\$	
s	
\$	
<u> </u>	
\$	
s	
Total of Expenditures (\$100 or less each payee)	\$ 150.75
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 1,185.57
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 433b.3/2
20. LOAN REPAYMENTS MADE THIS PERIOD	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$1,336.3d
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)	\$ <u>2600.00</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.t	s)s <u>2500.0</u> 0
23.OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$\$
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>+</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i iter	



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1_NAME OF CANDIDATE OR COMMITTEE	anstiela	2. REPORT COVE FROM (1.1.1)	1-01
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	CM / TO IT OCE	4	Amount
·		ontributions totaling more than \$100 from any contributo	\$1025,00
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name	<u></u>	Primary Election General Election	\$325
Address (CVIS) by and	LCOS 0	Runoff (Local Elections Only)	# () ()
CALATIN	703-2 170 37076	Date of Contribution	Aggregate This Election
Occupation + Come on C	iker	4/2/18	
Self:			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organisation Name		☐ Primary Election ☐ General Election	\$500°C
Address 1934 Byrnes	Road	Runoff (Local Elections Only)	
Sugusta	Spale A 70 Come SCII	Date of Contribution	Aggregate This Election
Oral Suro	HOD	4/10/18	
Employer Seld)	, ,	
First Name T	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		General Election General Election	110000
Address + 87- Mers Sm	ckle ISlAnd	Runoff (Local Elections Only)	100
Henderson ville	State Zip Code 3+67-5	Date of Contribution	Aggregate This Election
Occupation Unit 1000 A TV	<u> </u>	4/10/18	
Employer		(7.0 178	
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name Granization Name Lummer		General Election General Election	\$100
Address 409 Pine C	Cast	Runoff (Local Elections Only)	
City Alh An CA	54 31707	Date of Contribution	Aggregate This Election
Occupation Harth C	aré Rocsuis	4/12/18	
EMPLOYALLAND HOSE	Dital	,,,,,	
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			

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR CO		C 10	56010	1	2. REPORT COVER			
		-		(Amount 00		
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)								
First Name Middle Name			In-Kind Contribution Receive		Value of In-Kind Contribution			
Last Name/Organization Name	· -			=	General Election	200		
DEAND A	1PA	<u>. CO</u>	<u> 400 - </u>	Runoff (Local Election		2500		
Address	5CO	2es	K	 	<u> 1.18 </u>	Aggregate this Election		
Coodle Hs	1110	17 37072		Description of In-Kind Contribution LGGO BR	AnDina.	Web Desk		
Cocupation Used designer	Employer	o L		Logo, Br. Mailer d	esisn.	SILY DESILY		
First Name		Middle Harr	ne	In-Kind Contribution Receive		Value of In-Kind Contribution		
Last Name/Organization Name		<u> </u>	<u></u>	1 =	General Election			
Address				Date of In-Kind Contribution	ns Only)	Accordate this Election		
		Tail.	1 = 2 :			Aggregate this Election		
City	T = .	State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer							
First Name		Middle Nan	ne	In-Kind Contribution Receive	d For:	Value of In-Kind Contribution		
Last Name/Organization Name		<u> </u>		1 🖁	General Election			
Address				Runoff (Local Election	ns Only)	Aggregate this Election		
<u> </u>		Louis	T 7- 0- 1-			- Aggregate and crectors		
City	Employer	State	Zip Code	Description of In-Kind Contribution				
Сссорация	ыроуа							
First Name		Middle Nam	те	In-Kind Contribution Receive	_	Value of In-Kind Contribution		
Last Name/Organization Name]	General Election			
Address				Runoff (Local Election	ns Only)	Aggregate this Election		
City		State	Zip Code	Description of In-Kind Contribution				
Occupation	Émployer	Case	Lip cous	- Description of all-fully contribution				
First Name		Middle Name	9	In-Kind Contribution Receive		Value of In-Kind Contribution		
Last Name/Organization Name				Primary Election				
Address				Date of In-Kind Contribution	Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer			-				
5. TOTAL ITEMIZED IN-KIND CC (Carry forward to item 3. of next page if a			e used.)					
(If this is the last page of in-kind contribu	tions, this amou	nt must be sho	own in item 22b. of summary			DDA 4450		
SS-1128 (Rev. 2/06)				Pag	e of	RDA 1159		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	am	Stield		2. REPORT COVER	TO: 4.24.18
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	JRES FRO	M PRECEDING PAGE	(enter \$0 if first itemized pa	ige)	Amount 67
4. COMPLETE THE APPROPRIATE ITEMS FOR E					riod)
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Markets Ch Address 504 Elm Hill	PIK PIK	2	advert	ising	195.88
NAShville	State	37210			
FirstName	Middle Nar		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Address 1504 ELM City	Pilop Zip Code	advert	isins	\$21851	
Mashville	State	37210			·
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Address 500 51 500 51	aic	0	maile	C	\$771.8
1304 CM A	State	Zip Code 37210			
First Name	Middle Nam	ne	Purpose of Expenditure	 -	Amount of Expenditure
Last Name/Business Name	•				
Address					
City	State	Zip Code			
First Name	Middle Nam	ie .	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	<u> </u>				
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			
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					

SS-1129 (R	ev. 4/02)
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ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE (2. REPORT COVERING THE			THE PERIOD							
								ROM:		TO:	
3. COMPLETE THE APPRO	PRIATE ITEMS	FOR EACH	ITEMIZ	ED LOAN	loans totaling n	nore than \$10	00 from any source	e during the p	eriod)	<u> </u>	/
Complete the Following for the S	Source of the Loan					8		<u> </u>		7	·
First Name				Outstanding I		Loan: Receiv		oan yments	26		g Loan Batance of Period)
Last Name/Organization Name				(====================================		1100011		,		12110	or r enoug
Address	<u> </u>			Loop Possile	Loan Received For:						
			toan Received For: Primary Election								
City	State	Zip Code			Local Elections		al Exception				
	List All Endo	rsers or Guar	antors fo	or Above Loa	n (If more spa	ce is neede	ed please attact	a page)			
First Name		Middle Name	6		First Name	/			Middle	e Name	
Last Name/Organization Name					Last Name/Org	janization Na	ame			-	
Address		(Address						
City	` `	State	Zi/A	de .	City				State	· ·	Zip Code
Amount Guaranteed Outstanding		/	٣	<u>)</u>	Appount Guaranteed Outstanding						
First Name	First Name Middle Name				First Name Middle Name						
Last Name/Organization Name					Last Name/Org	janization Na	ime		<u>'</u>		
Address	Address				Address						
City		State	Zip Co	de	City			· • • • • • • • • • • • • • • • • • • •	State		Zip Code
Amount Guaranteed Outstanding			•		Amount Guarar	nteed Outstan	nding				L
First Name		hiddle Name	9		First Name	-			Midd	e Name)
Last Name/Organization Name					Last Name/Org	anizalion Na	me				
Address			-		Address						
City		State	Zip Cor	de	City					Zip Code	
Amount Guaranteed Outstanding	/	<u> </u>	•		Amount Guaranteed Outstanding						
First Name Middle Name				First Name Middle Name							
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City	City State Zip Code			de	City State Zip Code					Zip Code	
Amount Guaranteed Outstanding					Amount Guaran	teed Outstan	ding		1		
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.) fotal 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.)								tanding Loan Balance (End of Period)			
(Total damining was souther should also be shown in heart (2.6, 0) from page.)										Ц	

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	FROM: Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle N	ame			/	···
Last Name/Business Name	<u> </u>					
Address						
City	State	Zip Code				
Description of Obligation	<u> </u>	<u> </u>		· · · · · · · · · · · · · · · · · · ·	<u>. </u>	<u> </u>
First Name	Middle Na	ame				
Last Name/Business Name			/			
Address			/			
City	State	Zip Code	/			
Description of Obligation		1 (· /		}	J.,
First Name	Middle Na	ame				
Last Name/Business Name						
Address		\rightarrow	_			
City	State	Zip Code				
Description of Obligation				· · · · · · · · · · · · · · · · · · ·	·	·
First Name	Middle Na	 ame				
Last Name/Business Name	<u> </u>		-			
Address			1			
City	State	Zip Code	-			
Description of Obligation	, <u>I</u> , ,				<u>.</u>	<u> </u>
First Name	Middle Na	vme				
Last Name/Business Name	<u> </u>		_ ·			
Address			-			
City	State	Zip Code	1			
Description of Obligation	1	<u> </u>	1	<u> </u>	<u> </u>	
4. VOTALS						
Total from Outstanding Balance - (End of Period) in item 23b. on summary page.)	column mus	st also be shown				

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