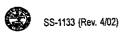
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

	1 01 09.0				
1. DATE OF REPORT 1. 0 A A A A A A A A A A A A A A A A A A	2.a. NAME	OF CANDIDATE OF	ROMMITTEE	14 B	POLON /
2.b. IF COMMITTEE, NAME OF	CANDIDATE	cinac !	· reigna	3. ELECTION DAT	roun
	·····			Hugus	+ 3,2018
4.a. CAMPAIGN ADDRESS AND Street or Rural Route	PHONE City		State	Zip Code	Phone
1508 6.13	eradway G	allatin	91	37066	615-452-380)
4.b. CANDIDATE'S HOME ADDR Street or Rural Route	ESS (if different tyfan 4.a.) City	,	State	Zip Code	Phone
5. OFFICE SOUGHT (include di	strict number, if applicable)	6. NAME	OF POLITICAL	TREASURER (may b	e candidate)
7. CATEGORY OR REPORT (Ch	reck one)		Ottices	H. HA	TUN
FIRST SECOND QUARTER QUARTER	THIRD FOURT		PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORT		8.b. ENDI	NG DATE OF REPO		
CANA 16, 2018		7 1/11	ech 31,2	2018	
9. (Check-bne)			na /inalustina in l	ind) manipad total #4	000 or less AND avoordi
a. This campaign is exer tures total \$1,000 or k	npt from detailed disclosure to ess for this reporting period.	ecause contributio (Complete items 12	ns (including in-k 2d., 12e. and 12f.	ind) received total \$1,)	000 or less AND expendi-
b. This campaign is requ and/or expenditures to	ired to file a detailed financia otal more than \$1,000 for this	l disclosure becaus reporting period.	se contributions (i	ncluding in-kind) rece	ved total more than \$1,000
accurate accounting of camp Financial Disclosure Act. Ac	affirm that the information corpaign contributions and experibilitionally, I/we swear or affinor any other nonpolitical purpolitical pu	nditures required to in that no campaigi	be reported by the contributions ha	ne candidate committe ve been expended fo il revenue code.	ee by the Campaign
Servi					
11. WITNESS SIGNATURE signature of witness	4/10 date	12018	Kigna signa	ature of witness	4/10/2018
12. SUMMARY	FU E	7			
a. BALANCE ON HAND LA:	STREPORT	P.M.		s <u> </u>	<u>) </u>
b. TOTAL RECEIPTS THIS P	EADM. APR 10201	• .	•••••	\$	<u>)</u>
c. TOTAL DISBURSEMENTS	SUMNER COL	UNTY		\$	<u>D</u>
d. BALANCE ON HAND (1	ELECTION GRA!	MISSION			. \$ <u>U</u>
e. TOTAL LOANS OUTSTA					. \$ <u>ð</u>
f. TOTAL OBLIGATIONS O	UTSTANDING				. \$

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
	FROM: TO:
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)
<u> </u>	
<u> </u>	. <u> </u>
\$	
\$	
<u> </u>	
\$	
*	
<u> </u>	
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	
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)	•
this poriod)	
temized in-kind contributions (over \$100 from each source this period) TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.a.)	
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 ii	



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVE	RING THE PERIOD
				FROM:	TO:
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FRO	M PRECEDING PAG	GE (enter \$0 if first itemized p	age)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH ITEMIZ	ED CONTRIBUTION (contributions totaling more than \$	100 from any contributo	r)
First Name	Middle Nam	8	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	ne	Contribution Received For	:	Amount of Contribution
Last Name/Organization Name	<u> </u>		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
First Name Last Name/Organization Name	Middle Nam	е		: General Election	Amount of Contribution
	Middle Nam	е		General Election	Amount of Contribution
Last Name/Organization Name	Middle Nam	e Zip Code	Primary Election [General Election	Amount of Contribution Aggregate This Election
Last Name/Organization Name Address			Primary Election [General Election	
Last Name/Organization Name Address City			Primary Election [General Election	
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	☐ Primary Election [☐ Runoff (Local Election ☐ Date of Contribution	General Election	Aggregate This Election
Last Name/Organization Name Address City Occupation Employer First Name		Zip Code	Primary Election [Runoff (Local Election Date of Contribution Contribution Received For:	General Election	
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	☐ Primary Election [☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐	General Election as Only) General Election	Aggregate This Election
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address	State Middle Nam	Zip Code	☐ Primary Election [☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ Runoff (Local Election	General Election as Only) General Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State	Zip Code	☐ Primary Election [☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐	General Election as Only) General Election	Aggregate This Election
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Nam	Zip Code	☐ Primary Election [☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ Runoff (Local Election	General Election as Only) General Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Nam	Zip Code	☐ Primary Election [☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ Runoff (Local Election	General Election as Only) General Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Nam	Zip Code Zip Code	☐ Primary Election [☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ Runoff (Local Election	General Election as Only) General Election	Aggregate This Election Amount of Contribution

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

 NAME OF CANDIDATE O 	R COMMITTEE					RING THE PERIOD
					FROM:	TO:
3. TOTAL ITEMIZED IN-KINI	CONTRIBUTIONS	FROM	PRECEDING PAG	E (enter \$0 if first itemized page	9)	Amount
				IBUTION (in-kind contributions totaling		intributor during the period)
First Name	rst Name Middle Name		In-Kind Contribution Receive		Value of In-Kind Contribution	
Last Name/Organization Name			Runoff (Local Election			
Address	·-··			Date of In-Kind Contribution		Aggregate this Election
City	St	tate	Zip Code	Description of In-Kind Contribution		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Occupation	Employer					
First Name	M	liddle Nam	Ne	In-Kind Contribution Receive	ed For: General Election	Value of In-Kind Contribution
Last Name/Organization Name				Runoff (Local Electio		
Address				Date of In-Kind Contribution		Aggregate this Election
City	S	tate	Zip Code	Description of In-Kind Contribution	1	
Occupation	Employer					
First Name	M	liddle Nan	. <u>.</u> 1e	In-Kind Contribution Receive		Value of In-Kind Contribution
Last Name/Organization Name	<u> </u>		· 	Primary Election [General Election ons Only)	
Address				Date of tr-Kind Contribution		Aggregate this Election
City	s	State	Zip Code	Description of In-Kind Contribution	n	
Occupation	Employer					
First Name		/liddle Nan	nė	In-Kind Contribution Receive		Value of In-Kind Contribution
Last Name/Organization Name	1			Primary Election Runoff (Local Election	General Election ons Only)	
Address				Date of In-Kind Contribution	- 7./	Aggregate this Election
City	s	State	Zip Code	Description of In-Kind Contribution	n	
Occupation	Employer		•			
First Name	M	liddle Nam	e	In-Kind Contribution Received	ved For:	Value of In-Kind Contribution
Last Name/Organization Name			Runoff (Local Election			
Address				Date of In-Kind Contribution		Aggregate this Election
City	St	tate	Zip Code	Description of In-Kind Contribution	1	•
Occupation	Employer	_				
5. TOTAL ITEMIZED IN-KIN (Carry forward to item 3. of next			re used.)			
(If this is the tast page of in-kind	contributions, this amount m	nust be sh	own in item 22b. of sum			
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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		• •		2. REPORT COVE	RING THE PERIOD		
				FROM:	TO:		
					Amount		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU							
4. COMPLETE THE APPROPRIATE ITEMS FOR B	ACH ITEM	IZED EXPENDITURE (e	expenditures totaling more than \$100	to any payee during the pe	riod)		
First Name	Middle Nar	TI Q	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			1				
Address							
City	State	Zip Code					
First Name	Middle Name			, ,	Amount of Expenditure		
Last Name/Business Name	-l		1				
Address			-				
City	State	Zip Code	-				
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	1		1				
Address			1				
City	State	Zip Code	1				
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	•						
Address							
City	State	Zip Code					
First Name	Middle Nam	0 0	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					
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 mus	i de snown in	item 19b. of summary.)			1		

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ITEMIZED STATEMENT OF LOANS - CANDIDATE

NAME OF CANDIDATE	OR COMMITTEE					"	2.	REPORT	COVE	RING THE PERIOD
							FI	ROM:		TO:
3. COMPLETE THE APPRO	OPRIATE ITEMS I	FOR EACH I	TEMIZ	ZED LOAN	loans totaling r	nore than \$10	00 from any source	e during the p	eriod)	
Complete the Following for the	Source of the Loan	•								
First Name	Middle Na	TIB .		Outstanding t (Beginning	oan Balance of Period)	Loans Receiv		Loan syments	Out	standing Loan Balance (End of Period)
Last Name/Organization Name	· · · · · · · · · · · · · · · · · · ·			1						
Address					Loan Received For: Date of Loan					
City	State	Zip Code		l	Primary Election General E Runoff (Local Elections Only)					
	List All Endo	rsers or Guara	antors f	or Above Loa	n (If more spa	ice is neede	ed please attac	h a page)		
First Name		Middle Name)		First Name				Middle	Name
Last Name/Organization Name		•			Last Name/Or	ganization Na	irne			
Address					Address					~
City		State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding		<u> </u>	· 		Amount Guara	nteed Outstar	nding			<u> </u>
First Name		Middle Name)		First Name Middle Name				Name	
Last Name/Organization Name					Last Name/Organization Name					
Address					Address					
City		State	Zip Ca	ode	City State Zip Code				Zip Code	
Amount Guaranteed Outstanding					Amount Guara	nteed Outstar	nding		-	
First Name		Middle Name)		First Name			7	Middl	e Name
Last Name/Organization Name	an .	•			Last Name/Organization Name					
Address				<u></u>	Address					
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding		<u> </u>	<u> </u>	. •	Amount Guaranteed Outstanding					
First Name		Middle Name			First Name Middle Name					Name
Last Name/Organization Name				Last Name/Organization Name						
Address					Address					
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding		-l	1		Amount Guara	nteed Outstan	ding		1	
4. Totals for all Loans (comple	ete on last page of	itemized loa	ns)		Outstanding Lo	oan Balance	Loans	Loa	n	Outstanding Loan Balance
(Total loans received should also be (Total loan payments should also be (Total outstanding loan balance shou	shown in item 16, on a shown in item 20, on a	summary page.) summary page.))	;	(Beginning o		Received	Раул		(End of Period)
,			- 3-1					1		1



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
		FROM:	TO:			
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)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Nar	ne				
Last Name/Business Name	·	 				
Address			-			
City	State	Zip Code				
Description of Obligation	<u> </u>	 		l		
First Name	Middle Nar	me				
Last Name/Business Name	<u> </u>					
Address						
City	State	Zip Code	7			
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Nar	TIE .				
Last Name/Business Name	•					
Address			7			
City	State	Zip Code				
Description of Obligation		1		. .	•	
First Name	Middle Nar	ne				
Last Name/Business Name	.1					
Address						
City	State	Zip Code				
Description of Obligation	1	1				<u> </u>
4. TOTALS						
(Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)	olumn mus	t also be shown				

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