CAMPAIGN FINANCIAL DISCLOSURE STATEMENT For State and Local Candidates

	oingie-Cai	ididate	Committ	ees				
1. DATE OF REPORT	2.a. NAME OF C	ANDIDATE OR	COMMITTEE	_	Api			
4-9-18	Roy "S	50015"	Wenth	erfored, Sc	1/4. " T 9. D.			
2.b. IF COMMITTEE, NAME OF CANDIDATE	, ,	7		3. ELECTION DY	APH 9.2018			
				man 1	Stark Oil			
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Phone Phone			
1654B Hwy 2315.	Bethpare	•	701	37022 (615)841-4024			
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	than 4.a.) City		State	Zip Code	Phone			
5. OFFICE SOUGHT (include district number, if	applicable)	1 / // 1	\sim	TREASURER (may b	e candidate)			
7. CATEGORY OR REPORT (Check one)		<u> </u>	ery/ Co	2/lins				
FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD				ORTING PERIOD				
1-16-18		3-3	71-18					
 9. (Check one) a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete Items 12d., 12e. and 12f.) b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period. 								
10. I/we do solemnly swear or affirm that the infinaccurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we statement of the candidate or for any other none signature of candidate Control Control	ns and expenditures wear or affirm that i	s required to be no campaign o defined by the	e reported by the contributions have	e candidate committe ve been expended for I revenue code.	e by the Campaign			
11. WITNESS SIGNATURE								
Vanny Weather and signature of witness	4-9-18 date		ammy signal	Weathauer ture of witness	d 4-9-18 date			
12. SUMMARY				•				
a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PERIOD d. BALANCE ON HAND (12.a. plus 12.b. min	***************************************		***************************************	. 33,215. 1 <u>1</u>	<u>-</u>			
b. TOTAL RECEIPTS THIS PERIOD	•••••••••••••••••••••••••••••••••••••••	***************************************	******************	s 1,550.°	-			
c. TOTAL DISBURSEMENTS THIS PERIOD	*************************			s <u>4,067.°</u>	<u> </u>			
d. BALANCE ON HAND (12.a. plus 12.b. min	us 12.c.)				30,698.09			
e. TOTAL LOANS OUTSTANDING								
f. TOTAL OBLIGATIONS OUTSTANDING					0			



SUMMARY PAGE - CANDIDATE

Г	12 NAME OF CANDIDATE OF CANDIDATE		·			
	13. NAME OF CANDIDATE OR COMMITTEE (In Full) Roy "Song" Weatherford			14. REPORT COV	ÆRIN	G THE PERIO
ŀ	RECEIPTS Weathertord			FROM: 1-16-18	TO:	3-31-18
	15. CONTRIBUTIONS (other than loans and interest)					
l	a. Uniternized Contributions (\$100 or less from each source this per	iod	d)	<u> ಕ್ರಾರ್ತಿ</u>		
	 b. Itemized Contributions (over \$100 from each source this period) 				_	
	c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.	а.	and 15.b.)		 \$ _	1.550.00
	\$	ه _				
'	17. INTEREST RECEIVED THIS REPORTING PERIOD	••••			\$ _	0
<u> </u>	8. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item	12.	.b.)	*************************	\$	1550.00
	DISBURSEMENTS		<u> </u>			
1	9. EXPENDITURES (other than loan payments)					
	a. Expenditures (\$100 or less each payee this period) (must be listed b	y c	ategory - e.g	., printing, postage.	gasoli	ine)
	T. In I am I am a		50.00			- /
	Purchase checks-	\$	49 81			
		s	330.	-		
	Dues		250			
	Contributions		275	<u>~</u>		
		* . «	<u> </u>	_		
		Ψ. •				
		Φ.				
		≯ _		_		
		· _	-			İ
	Total of Expenditures (\$100 or less each payee)			994. 1	_	
b.	Itemized Expenditures (Over \$100 each payee this period)			3072. 20		
C.	TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and	19	.b.)	***************************************	\$ 4	1067.01
20.	LOAN REPAYMENTS MADE THIS PERIOD		******************	********************	\$	0
21.	TOTAL DISBURSEMENTS (add 19.c, and 20.) (must be shown in item	a 1:	2.c.)	***************************************	\$(1067.
22	IN-KIND CONTRIBUTIONS			<u></u>		
a.	Unitemized in-kind contributions (\$100 or less from each source this pe	eric	od)\$			
	Itemized in-kind contributions (over \$100 from each source this period)					
	TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.				5	0
23.	OBLIGATIONS					
a.	Unitemized Obligations Outstanding (\$100 or less each)		\$			
b.	Itemized Obligations Outstanding (Over \$100 each)	••••	\$			
	TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be s					0
	· · · · · · · · · · · · · · · · · · ·			*****		;

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITT	EE			2 PEDODE COM	FONO THE DEDICE
Roy" Sonny" W		erford		FROM:	RING THE PERIOD
3. TOTAL ITEMIZED CAMPAIGN CONTR			PAGE (enter \$0 if first itemized a		Amount
4. COMPLETE THE APPROPRIATE ITEMS F	OR EACH ITE	MIZED CONTRIBUTION	N (contributions totaling more than t	tage)	0
First Name	Middle		Contribution Received For:	TOO from any contribut	
Lisa Milton Lest Name/Organization Name					Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	250. ==
Sq1 upper Station (ann C	reek Rd	Runoff (Local Election	s Only)	Q 9.
Gallatia	State	Zip Code 37066	Date of Contribution	· · · · · · · · · · · · · · · · · · ·	Aggregate This Election
Occupation		1 10 1066	1/25/18		
Employer Curtis Builders		<u> </u>	_		
Curro Duibers			•		
First Name	Middle !	lame	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		·	Primary Election	General Election	500.
Address			Runoff (Local Elections	o Oaka	J 500 .
122 Rogers St.				s Only)	
Hartsuille	State 7~	Zip Code	Date of Contribution		Aggregate This Election
Occupation	1,770	37074	21./18	•	
Alternes			- ~11/18	8	
Employer					}
First Name	Middle Na	ime	Contribution Received For:		Amount of Contribution
Bob Last Name/Organization Name			☐ Pfimary Election ☐	General Election	Í
Summers				Celleral Electron	500.
Address			Runoff (Local Elections	Only)	306.
P. O. Box 8857	12:5		<u>i </u>		_
Galletin	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation	114	37066	┥		
Employer Self employ.	وط		2/8/	ع ا	
Employer] ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	1 1 4	
First Name	Middle Na	The State of the S	Contribution Received For:		Amount of Contribution
.ast Name/Organization Name		 	☐ Primary Election ☐	General Election	İ
Address	.		Runoff (Local Elections	Only)	
Eity	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation .		<u> </u>			- 3334.0 FIRE FIRE
mnlover				1	ĺ
mployer					
i. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pag (If this is the last page of contributions, this amount ma	es of this form a ust be shown in i	re used.) tem 15b. of summary.)			41250.
······································				i i	

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR (COMMITTEE		2. REPORT COV	ERING THE PERIOD
1. NAME OF CANDIDATE OR C	Weath	erford	FROM: 1~16-18	7 TO: 3-31-18
ļ ,			GE (enter \$0 if first itemized page)	Amount
4. COMPLETE THE APPROPRIATE	ITEMS FOR EACH I	TEMIZED IN-KIND CONT	RIBUTION (in-kind contributions totaling more than \$100 from any	contributor during the period)
First Name	Mid	dle Name	In-Kind Contribution Received For:	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	<u> </u>
Occupation	Employer	-		
First Name	Midd	dle Name	In-Kind Contribution Received For:	Value of In-Kind Contribution
Last Name/Organization Name		·····	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Address			Date of In-Kind Contribution	Aggregate this Election
City	State	a Zip Code	Description of In-Kind Contribution	
Occupation	Employer			
First Name	Midd	ile Name	In-Kind Contribution Received For:	Value of In-Kind Contribution
Last Name/Organization Name			Primary Election General Election	
Address			Date of In-Kind Contribution	Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	
Occupation	Employer			
First Name	Midd	lle Name	In-Kind Contribution Received For.	Value of In-Kind Contribution
Last Name/Organization Name			☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Address			Date of in-Kind Contribution	Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	l
Occupation	Employer			
First Name	Middle	e Name	In-Kind Contribution Received For	Value of In-Kind Contribution
Last Name/Organization Name	<u> </u>		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Address			Date of In-Kind Contribution	Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	. 1
Occupation	Employer		· ·	
5. TOTAL ITEMIZED IN-KIND CO	ONTRIBUTIONS			
(Carry forward to item 3. of next page if (If this is the last page of in-kind contrib			nary.)	
SS-1128 (Rev. 2/06)			Page 4 of 8	RDA 1159

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	
Ray "Song" We	a ther	for L		FROM: 1-16-18	TO:3-31-18
	_				
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	<u> </u>				
4. COMPLETE THE APPROPRIATE ITEMS FOR E	EACH ITEMIZ	ZED EXPENDITURE (ex	xpenditures totaling more than \$100	to any payee during the per	iod)
First Name	Middle Nam	10	Purpose of Expenditure		Amount of Expenditure
	<u> </u>	· ···· ······			
Last Name/Business Name			· .		50-00
Compass			Donation		500.
695 E. Main St.					
City	State	Zip Code	1		
Gallatin	TN	37066			
First Name	Middle Nan		Purpose of Expenditure		Amount of Expenditure
İ					
Last Name/Business Name	,		_		00
Hendersonville Ro	tary		Dues		150.
Addresp D ROV 473	•				
City	Stale	Zip Code	1		
Hendersonville	120	37011			
	+		Purpose of Expenditure		Amount of Expenditure
First Name	Middle Nam	16	Fulpose of Experiment		AMOUNT OF EXPONDING
Last Name/Business Name			1		_
Summer County Ca	Sa	<u>.</u>		150.00	
			Donath	^	1 3 5.
182 W Franklin 5	T State	Zip Code	+		
City		•			
Gallatin	TN	37066	<u> </u>		V
First Name	Middle Nam	6	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			1		
Summer County Anti	Drue	Coelition			150.
			Donat	760	130.
102 Public Squar	<u>~e</u>		-		
1 🛋		Zip Code			
Gallatin	Tou	37066			
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
	<u> </u>		4		
Last Name/Business Name	7				1 222
Galletin Shalom	مد		Don	to a	1,000.
600 Small St. #	107 A	·			
City	State	Zip Code]		
Gallatio	TN	37066	<u> </u>		<u> </u>
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
	<u> </u>		4		
Last Name/Business Name	1				20
Rotary Internetion	<u>~ a </u>		l Du	rs .	122.
Address P. O. Box, 473					
City	State	Zip Code	1		
Hendersonville	75.	37075			
100-07001011	177-	97011			
	1,7-2	0 70 1			2.0
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page If additional page (If this is the last page of expenditures, this amount mu	es of this form a	are used.)			2,072 =

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	ING THE PERIOD					
Roy "Jonny" Weather	TO: 3-31-18					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	(enter \$0 if first itemized page	ge)	Amount 2072.20			
4. COMPLETE THE APPROPRIATE ITEMS FOR E						
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	<u> </u>				6.9	
Friends of Hannah			Donath	9 0	500.	
123 Big Station C	a.m.P	RL				
City	State TN	Zip Code				
(rallatin		37046	Programme of Transport		Associated Francisco	
First Name	Middle Na	me	Purpose of Expenditure	:	Amount of Expenditure	
Last Name/Business Name	7	1			u s	
David Howard for		1 .	Contri	bution	250.	
105 Blue grass Commons	Dr. 5	uile D				
Hendersonville	State	Zip Code 37075				
First Name	Middle Na		Purpose of Expenditure		Amount of Expenditure	
	NIIOGAC IVA		, a.pass sps		,	
Last Name/Business Name Maria Stewart for Expanting	10. C.	nuite Whoman			Øn.	
Address		THE THE PARTY OF T	Contrib	utton	250.	
1089 Sandy Valley R	Zip Code					
Hendersonville	State	37075				
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	<u> </u>					
Address						
	- Dinin	7in Code				
City	State	Zip Code				
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure	
			. ,			
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	First Name Middle Name				Amount of Expenditure	
Last Name/Business Name						
THE THE CONTRACT THE TO						
Address						
City	State	Zip Code				
5. TOTAL ITEMIZED EXPENDITURES		<u> </u>			1,000 .	
(Carry forward to Item 3. of next page if additional pages (If this is the last page of expenditures, this amount must	of this form a be shown in	are used.) ilem 19b. of summary.)			1,000.	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE	OR COMMITTEE						2.	REPORT (ING THE PERIOD	
		FR	OM:		TO: 3-31-18						
2 COMPLETE THE ADDR	Ran" Sonn Weatherford FROM: 10: 3-31-18 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)										
		OREAGIT	1 111112	LD EOAIV (ivans totaling i	note plan \$100	nom any source	during the pe	100)		
Complete the Following for the First Name	e Source of the Loan Middle Nam			Outstanding L	nan Balance	Loans	<u> </u>	оал	Outst	tanding Loan Balance	
- Fast Ivalue	Wildole Nam	10		(Beginning		Receive		ments		(End of Period)	
Last Name/Organization Name		- 1		1							
Address				Loan Receive	ed For:		•	Date of Loa	n		
City	State	Zip Code		Primary	Election	General	Election				
				☐ Runoff(Local Elections	Only)					
	List All Endon	sers or Guara	intors f	or Above Loa		ace is neede	d please attach	a page)			
First Name		Middle Name			First Name				Middle	Name	
Last Name/Organization Name	-				Last Name/Or	ganization Nar	TI Q				
Address					Address						
City		State	Zip C	ode	City				State	Zip Code	
Amount Guaranteed Outstanding			<u> </u>	<u> </u>	Amount Guara	anteed Outstan	ding		1		
First Name		Middle Name	'	-	First Name				Middle	Name	
Last Name/Organization Name					Last Name/Organization Name						
Address		-			Address		•				
City	5/2.	State	Zip C	ode	City					Zip Code	
Amount Guaranteed Outstanding	··· <u>-</u> .	. L	•		Amount Guara	anteed Outstan	ding		-	· · · · · · · · · · · · · · · · · · ·	
First Name		Middle Name	1		First Name	-			Middle	n Name	
Last Name/Organization Name	· · · · · · · · · · · · · · · · · · ·				Last Name/Or	ganization Na	me				
Address		 _			Address				-		
City		State	Zip C	ode	City			· · · -	State	Zip Code	
Amount Guaranteed Outstanding		l			Amount Guara	anteed Outstan	ding		1	·	
First Name		Middle Name	,		First Name	·		·	Middle	Name	
Last Name/Organization Name		<u></u>	<u>-</u> -		Last Name/Organization Name					<u></u>	
Address	1	<u></u>		 —	Address						
City	····	State	Zip C	ode	City				State	Zip Code	
						anteed Outstan	idina				
Amount Guaranteed Outstanding											
4. Totals for all Loans (com	plete on last page of	itemized loa	ıns)		Outstanding L (Beginning		Loans Received	Los Payn		Outstanding Loan Balance (End of Period)	
(Total loans received should also (Total loan payments should also (Total outstanding loan balance si	be shown in item 20. on :	summary page.)		Tredunuià	or i dilodi	16001140			<u>(Cincol)</u>	
(lotal outstanding loan balance si	audio aiso de snown di iter	41 12.0. UN 11UML	paye.	•	<u> </u>						

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
Ray 4 Sonos " (e)	eath,	or for d		FROM: 1-16-	18 TO: 3	3-31-18
3. COMPLETE THE APPROPRIATE ITEMS F	OR EACH	ITEMIZED	Outstanding Balance	Debt Incurred	Payments	Outstanding Balance
OBLIGATION (obligations totaling more than \$100 owed to any			(Beginning of Period)	This Period	This Period	(End of Period)
person/vendor at the end of the reporting pe	auodi		<u> </u>			
First Name	Middle Na	ne				
Last Name/Business Name			-			
ESST NEUTRA DESIRESS TREATS						
Address						
City	State	Zip Code	-			
Sity	Sidio					
Description of Obligation		•				
First Name	Middle Nar	ne .	T			
Litzt Matike	IVIII GIE IVE	ino				
Last Name/Business Name			1			
Address			4			
Address						
City	State	Zip Code	1 .			
Description of Obligation			<u> </u>	<u> </u>		
Description of Congestion			•			
First Name	Middle Nar	ne				
Liter Lauring	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Last Name/Business Name			7			
Address			┥			
Aut. 655						
City	State	Zip Code				
Description of Obligation				<u> </u>		
First Name	Middle Nar	ne				•
	<u>l</u>		-			
Last Name/Business Name						
Address	<u></u> .		7			
	1 0	1	_]			
City	State	Zip Code		•		
Description of Obligation	L	1				<u> </u>
First Name	Middle Nar	ne			-· ———	
Lashbara Dirainag Na	<u>L</u>		-			
Last Name/Business Name			_]			
Address]			İ
City	State	Zip Code	-{	' '		
City	- Cuito					
Description of Obligation						,
TOTALS (Total from Outstanding Balance - (End of Period) c	olumn mue	t also he shown				(()
in item 23b. on summary page.)	VIGITAL IIIGG		<u>L</u>	<u></u>		`\