

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

A.M. FILED  
APR 9 2018  
ELECTIONS DIVISION  
SUNNER COUNTY COMMISSION

|   |  |
|---|--|
| 1. DATE OF REPORT<br><u>4-9-18</u>  | 2.a. NAME OF CANDIDATE OR COMMITTEE<br><u>Roy "Sonny" Weatherford</u>      |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE  | 3. ELECTION DATE<br><u>May 1, 2018</u>                                     |
| 4.a. CAMPAIGN ADDRESS AND PHONE<br>Street or Rural Route      City      State      Zip Code      Phone<br><u>16548 Hwy 231 S.</u> <u>Bethpage</u> <u>TN</u> <u>37022</u> <u>(615) 841-4024</u>  |  |
| 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)<br>Street or Rural Route      City      State      Zip Code      Phone   |  |
| 5. OFFICE SOUGHT (include district number, if applicable)<br><u>Sheriff</u>   | 6. NAME OF POLITICAL TREASURER (may be candidate)<br><u>Cheryl Collins</u> |
| 7. CATEGORY OR REPORT (Check one)<br><input checked="" type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL   |  |
| 8.a. BEGINNING DATE OF REPORTING PERIOD<br><u>1-16-18</u>   | 8.b. ENDING DATE OF REPORTING PERIOD<br><u>3-31-18</u>                     |
| 9. (Check one)<br>a. <input type="checkbox"/> 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.)<br>b. <input checked="" type="checkbox"/> 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 information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. |  |
| <u>Roy "Sonny" Weatherford</u><br>signature of candidate  | <u>Cheryl Collins</u><br>signature of political treasurer                  |
| <u>4-9-18</u><br>date   | <u>4-9-18</u><br>date  |
| 11. WITNESS SIGNATURE   |  |
| <u>Tammy Weatherford</u><br>signature of witness  | <u>Tammy Weatherford</u><br>signature of witness                           |
| <u>4-9-18</u><br>date   | <u>4-9-18</u><br>date  |
| 12. SUMMARY   |  |
| a. BALANCE ON HAND LAST REPORT .....  | <u>\$33,215.<sup>10</sup></u>  |
| b. TOTAL RECEIPTS THIS PERIOD .....   | <u>\$ 1,550.<sup>00</sup></u>  |
| c. TOTAL DISBURSEMENTS THIS PERIOD .....  | <u>\$ 4,067.<sup>01</sup></u>  |
| d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....   | <u>\$30,698.<sup>09</sup></u>  |
| e. TOTAL LOANS OUTSTANDING .....  | <u>\$ 0</u>  |
| f. TOTAL OBLIGATIONS OUTSTANDING .....  | <u>\$ 0</u>  |





# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

|  |                    |                          |  |                             |
|--|--------------------|--------------------------|--|-----------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE<br><b>Ray "Sonny" Weatherford</b>  |                    |                          | 2. REPORT COVERING THE PERIOD<br>FROM: <b>1-16-18</b> TO: <b>3-31-18</b>   |                             |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)  |                    |                          |  | Amount<br><b>0</b>          |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)   |                    |                          |  |                             |
| First Name<br><b>Lisa &amp; Milton</b>   |                    | Middle Name              | Contribution Received For:   |                             |
| Last Name/Organization Name<br><b>Curtis</b>   |                    |                          | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election<br><input type="checkbox"/> Runoff (Local Elections Only) |                             |
| Address<br><b>591 Upper Station Camp Creek Rd</b>  |                    |                          | Amount of Contribution<br><b>250.<sup>00</sup></b>   |                             |
| City<br><b>Gallatin</b>  | State<br><b>TN</b> | Zip Code<br><b>37066</b> | Date of Contribution<br><b>1/25/18</b>   |                             |
| Occupation   |                    | Aggregate This Election  |  |                             |
| Employer<br><b>Curtis Builders</b>   |                    |                          |  |                             |
| First Name<br><b>Randall</b>   |                    | Middle Name              | Contribution Received For:   |                             |
| Last Name/Organization Name<br><b>Beach</b>  |                    |                          | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election<br><input type="checkbox"/> Runoff (Local Elections Only) |                             |
| Address<br><b>122 Rogers St.</b>   |                    |                          | Amount of Contribution<br><b>500.<sup>00</sup></b>   |                             |
| City<br><b>Hartsville</b>  | State<br><b>TN</b> | Zip Code<br><b>37074</b> | Date of Contribution<br><b>2/1/18</b>  |                             |
| Occupation<br><b>Attorney</b>  |                    | Aggregate This Election  |  |                             |
| Employer   |                    |                          |  |                             |
| First Name<br><b>Bob</b>   |                    | Middle Name              | Contribution Received For:   |                             |
| Last Name/Organization Name<br><b>Summers</b>  |                    |                          | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election<br><input type="checkbox"/> Runoff (Local Elections Only) |                             |
| Address<br><b>P. O. Box 8857</b>   |                    |                          | Amount of Contribution<br><b>500.<sup>00</sup></b>   |                             |
| City<br><b>Gallatin</b>  | State<br><b>TN</b> | Zip Code<br><b>37066</b> | Date of Contribution<br><b>2/8/18</b>  |                             |
| Occupation<br><b>Self employed</b>   |                    | Aggregate This Election  |  |                             |
| Employer   |                    |                          |  |                             |
| First Name   |                    | Middle Name              | Contribution Received For:   |                             |
| Last Name/Organization Name  |                    |                          | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election<br><input type="checkbox"/> Runoff (Local Elections Only)            |                             |
| Address  |                    |                          | Amount of Contribution   |                             |
| City   | State              | Zip Code                 | Date of Contribution   |                             |
| Occupation   |                    | Aggregate This Election  |  |                             |
| Employer   |                    |                          |  |                             |
| 5. TOTAL ITEMIZED CONTRIBUTIONS<br>(Carry forward to item 3. of next page if additional pages of this form are used.)<br>(If this is the last page of contributions, this amount must be shown in item 15b. of summary.) |                    |                          |  | <b>\$1250.<sup>00</sup></b> |

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

|  |  |             |  |   |                    |                                     |
|--|--|-------------|--|---|--------------------|-------------------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE<br><i>Ray "Sonny" Weatherford</i>  |  |             |  | 2. REPORT COVERING THE PERIOD<br>FROM: <i>1-16-18</i> TO: <i>3-31-18</i>            |                    |                                     |
| 3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)   |  |             |  |   | Amount<br><i>0</i> |                                     |
| 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 Received For:  |                    | Value of In-Kind Contribution       |
| Last Name/Organization Name  |  |             |  | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                    |                                     |
| Address  |  |             |  | <input type="checkbox"/> Runoff (Local Elections Only)                              |                    |                                     |
| City   |  |             |  | State   | Zip Code           | Description of In-Kind Contribution |
| Occupation   |  | Employer    |  | Date of In-Kind Contribution  |                    |                                     |
| First Name   |  | Middle Name |  | In-Kind Contribution Received For:  |                    | Value of In-Kind Contribution       |
| Last Name/Organization Name  |  |             |  | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                    |                                     |
| Address  |  |             |  | <input type="checkbox"/> Runoff (Local Elections Only)                              |                    |                                     |
| City   |  |             |  | State   | Zip Code           | Description of In-Kind Contribution |
| Occupation   |  | Employer    |  | Date of In-Kind Contribution  |                    |                                     |
| First Name   |  | Middle Name |  | In-Kind Contribution Received For:  |                    | Value of In-Kind Contribution       |
| Last Name/Organization Name  |  |             |  | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                    |                                     |
| Address  |  |             |  | <input type="checkbox"/> Runoff (Local Elections Only)                              |                    |                                     |
| City   |  |             |  | State   | Zip Code           | Description of In-Kind Contribution |
| Occupation   |  | Employer    |  | Date of In-Kind Contribution  |                    |                                     |
| First Name   |  | Middle Name |  | In-Kind Contribution Received For:  |                    | Value of In-Kind Contribution       |
| Last Name/Organization Name  |  |             |  | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                    |                                     |
| Address  |  |             |  | <input type="checkbox"/> Runoff (Local Elections Only)                              |                    |                                     |
| City   |  |             |  | State   | Zip Code           | Description of In-Kind Contribution |
| Occupation   |  | Employer    |  | Date of In-Kind Contribution  |                    |                                     |
| First Name   |  | Middle Name |  | In-Kind Contribution Received For:  |                    | Value of In-Kind Contribution       |
| Last Name/Organization Name  |  |             |  | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |                    |                                     |
| Address  |  |             |  | <input type="checkbox"/> Runoff (Local Elections Only)                              |                    |                                     |
| City   |  |             |  | State   | Zip Code           | Description of In-Kind Contribution |
| Occupation   |  | Employer    |  | Date of In-Kind Contribution  |                    |                                     |
| 5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS<br>(Carry forward to item 3. of next page if additional pages of this form are used.)<br>(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.) |  |             |  |   | <i>0</i>           |                                     |

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

|  |                    |                          |  |  |                            |
|--|--------------------|--------------------------|--|--|----------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE<br><b>Roy "Sonny" Weatherford</b>  |                    |                          | 2. REPORT COVERING THE PERIOD<br>FROM: <b>1-16-18</b> TO: <b>3-31-18</b> |  |                            |
| 3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)   |                    |                          | Amount<br><b>0</b>   |  |                            |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)   |                    |                          |  |  |                            |
| First Name   |                    | Middle Name              | Purpose of Expenditure   |  | Amount of Expenditure      |
| Last Name/Business Name<br><b>Compass</b>  |                    |                          | <b>Donation</b>  |  | <b>500.<sup>00</sup></b>   |
| Address<br><b>695 E. Main St.</b>  |                    |                          |  |  |                            |
| City<br><b>Gallatin</b>  | State<br><b>TN</b> | Zip Code<br><b>37066</b> |  |  |                            |
| First Name   |                    | Middle Name              | Purpose of Expenditure   |  | Amount of Expenditure      |
| Last Name/Business Name<br><b>Hendersonville Rotary</b>  |                    |                          | <b>Dues</b>  |  | <b>150.<sup>00</sup></b>   |
| Address<br><b>P O Box 473</b>  |                    |                          |  |  |                            |
| City<br><b>Hendersonville</b>  | State<br><b>TN</b> | Zip Code<br><b>37071</b> |  |  |                            |
| First Name   |                    | Middle Name              | Purpose of Expenditure   |  | Amount of Expenditure      |
| Last Name/Business Name<br><b>Sumner County Case</b>   |                    |                          | <b>Donation</b>  |  | <b>150.<sup>00</sup></b>   |
| Address<br><b>182 W Franklin St</b>  |                    |                          |  |  |                            |
| City<br><b>Gallatin</b>  | State<br><b>TN</b> | Zip Code<br><b>37066</b> |  |  |                            |
| First Name   |                    | Middle Name              | Purpose of Expenditure   |  | Amount of Expenditure      |
| Last Name/Business Name<br><b>Sumner County Anti Drug Coalition</b>  |                    |                          | <b>Donation</b>  |  | <b>150.<sup>00</sup></b>   |
| Address<br><b>102 Public Square</b>  |                    |                          |  |  |                            |
| City<br><b>Gallatin</b>  | State<br><b>TN</b> | Zip Code<br><b>37066</b> |  |  |                            |
| First Name   |                    | Middle Name              | Purpose of Expenditure   |  | Amount of Expenditure      |
| Last Name/Business Name<br><b>Gallatin Shalom Zone</b>   |                    |                          | <b>Donation</b>  |  | <b>1,000.<sup>00</sup></b> |
| Address<br><b>600 Small St. #107A</b>  |                    |                          |  |  |                            |
| City<br><b>Gallatin</b>  | State<br><b>TN</b> | Zip Code<br><b>37066</b> |  |  |                            |
| First Name   |                    | Middle Name              | Purpose of Expenditure   |  | Amount of Expenditure      |
| Last Name/Business Name<br><b>Rotary International</b>   |                    |                          | <b>Dues</b>  |  | <b>122.<sup>20</sup></b>   |
| Address<br><b>P.O. Box 473</b>   |                    |                          |  |  |                            |
| City<br><b>Hendersonville</b>  | State<br><b>TN</b> | Zip Code<br><b>37079</b> |  |  |                            |
| 5. TOTAL ITEMIZED EXPENDITURES<br>(Carry forward to Item 3. of next page if additional pages of this form are used.)<br>(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.) |                    |                          |  |  | <b>2,072.<sup>20</sup></b> |

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

|  |                    |                        |  |  |                          |
|--|--------------------|------------------------|--|--|--------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE<br><b>Roy "Sonny" Weatherford</b>  |                    |                        | 2. REPORT COVERING THE PERIOD<br>FROM: <b>1-16-18</b> TO: <b>3-31-18</b> |  |                          |
| 3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)   |                    |                        | Amount<br><b>2,072.<sup>00</sup></b>                                     |  |                          |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)   |                    |                        |  |  |                          |
| First Name   | Middle Name        | Purpose of Expenditure | Amount of Expenditure  |  |                          |
| Last Name/Business Name<br><b>Friends of Hannah</b>  |                    | <b>Donation</b>        | <b>500.<sup>00</sup></b>   |  |                          |
| Address<br><b>123 Big Station Camp Rd</b>  |                    |                        |  |  |                          |
| City<br><b>Gallatin</b>  | State<br><b>TN</b> |                        |  |  | Zip Code<br><b>37066</b> |
|  |                    |                        |  |  |                          |
| First Name   | Middle Name        | Purpose of Expenditure | Amount of Expenditure  |  |                          |
| Last Name/Business Name<br><b>David Howard for Judge</b>   |                    | <b>Contribution</b>    | <b>250.<sup>00</sup></b>   |  |                          |
| Address<br><b>105 Bluegrass Commons Dr. Suite D</b>  |                    |                        |  |  |                          |
| City<br><b>Hendersonville</b>  | State<br><b>TN</b> |                        |  |  | Zip Code<br><b>37075</b> |
|  |                    |                        |  |  |                          |
| First Name   | Middle Name        | Purpose of Expenditure | Amount of Expenditure  |  |                          |
| Last Name/Business Name<br><b>Maria Stewart for Executive Committee Woman</b>  |                    | <b>Contribution</b>    | <b>250.<sup>00</sup></b>   |  |                          |
| Address<br><b>1089 Sandy Valley Rd</b>   |                    |                        |  |  |                          |
| City<br><b>Hendersonville</b>  | State<br><b>TN</b> |                        |  |  | Zip Code<br><b>37075</b> |
|  |                    |                        |  |  |                          |
| First Name   | Middle Name        | Purpose of Expenditure | Amount of Expenditure  |  |                          |
| Last Name/Business Name  |                    |                        |  |  |                          |
| 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 Name        | Purpose of Expenditure | Amount of Expenditure  |  |                          |
| Last Name/Business Name  |                    |                        |  |  |                          |
| Address  |                    |                        |  |  |                          |
| City   | State              |                        |  |  | Zip Code                 |
|  |                    |                        |  |  |                          |
| 5. TOTAL ITEMIZED EXPENDITURES   |                    |                        | Amount<br><b>1,000.<sup>00</sup></b>                                     |  |                          |
| (Carry forward to Item 3. of next page if additional pages of this form are used.)<br>(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.) |                    |                        |  |  |                          |

## ITEMIZED STATEMENT OF LOANS - CANDIDATE

|   |  |             |             |   |   |                               |                   |  |                  |   |   |          |
|---|--|-------------|-------------|---|---|-------------------------------|-------------------|--|------------------|---|---|----------|
| 1. NAME OF CANDIDATE OR COMMITTEE   |  |             |             |   | 2. REPORT COVERING THE PERIOD                     |                               |                   |  |                  |   |   |          |
| <i>Ray "Sonny" Weatherford</i>  |  |             |             |   | FROM:   |                               | TO:               |  |                  |   |   |          |
|   |  |             |             |   | <i>1-16-18</i>                                    |                               | <i>3-31-18</i>    |  |                  |   |   |          |
| 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period) |  |             |             |   |   |                               |                   |  |                  |   |   |          |
| Complete the Following for the Source of the Loan   |  |             |             |   |   |                               |                   |  |                  |   |   |          |
| First Name  |  | Middle Name |             | Outstanding Loan Balance<br>(Beginning of Period)                                   |   | Loans<br>Received             |                   | Loan<br>Payments                                       |                  | Outstanding Loan Balance<br>(End of Period) |   |          |
| Last Name/Organization Name   |  |             |             |   |   |                               |                   |  |                  |   |   |          |
| Address   |  |             |             | Loan Received For:  |   |                               |                   | Date of Loan   |                  |   |   |          |
|   |  |             |             | <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election |   |                               |                   |  |                  |   |   |          |
| City  |  |             |             | State   |   | Zip Code                      |                   | <input type="checkbox"/> Runoff (Local Elections Only) |                  |   |   |          |
| List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)                              |  |             |             |   |   |                               |                   |  |                  |   |   |          |
| First Name  |  |             | Middle Name |   |   | First Name                    |                   |  | Middle Name      |   |   |          |
| Last Name/Organization Name   |  |             |             |   |   | Last Name/Organization Name   |                   |  |                  |   |   |          |
| Address   |  |             |             |   |   | Address                       |                   |  |                  |   |   |          |
| City  |  |             | State       |   | Zip Code  |                               | City              |  |                  | State                                       |   | Zip Code |
| Amount Guaranteed Outstanding   |  |             |             |   |   | Amount Guaranteed Outstanding |                   |  |                  |   |   |          |
| First Name  |  |             | Middle Name |   |   | First Name                    |                   |  | Middle Name      |   |   |          |
| Last Name/Organization Name   |  |             |             |   |   | Last Name/Organization Name   |                   |  |                  |   |   |          |
| Address   |  |             |             |   |   | Address                       |                   |  |                  |   |   |          |
| City  |  |             | State       |   | Zip Code  |                               | City              |  |                  | State                                       |   | Zip Code |
| Amount Guaranteed Outstanding   |  |             |             |   |   | Amount Guaranteed Outstanding |                   |  |                  |   |   |          |
| First Name  |  |             | Middle Name |   |   | First Name                    |                   |  | Middle Name      |   |   |          |
| Last Name/Organization Name   |  |             |             |   |   | Last Name/Organization Name   |                   |  |                  |   |   |          |
| Address   |  |             |             |   |   | Address                       |                   |  |                  |   |   |          |
| City  |  |             | State       |   | Zip Code  |                               | City              |  |                  | State                                       |   | Zip Code |
| Amount Guaranteed Outstanding   |  |             |             |   |   | Amount Guaranteed Outstanding |                   |  |                  |   |   |          |
| First Name  |  |             | Middle Name |   |   | First Name                    |                   |  | Middle Name      |   |   |          |
| Last Name/Organization Name   |  |             |             |   |   | Last Name/Organization Name   |                   |  |                  |   |   |          |
| Address   |  |             |             |   |   | Address                       |                   |  |                  |   |   |          |
| City  |  |             | State       |   | Zip Code  |                               | City              |  |                  | State                                       |   | Zip Code |
| Amount Guaranteed Outstanding   |  |             |             |   |   | Amount Guaranteed Outstanding |                   |  |                  |   |   |          |
| 4. Totals for all Loans (complete on last page of itemized loans)   |  |             |             |   | Outstanding Loan Balance<br>(Beginning of Period) |                               | Loans<br>Received |  | Loan<br>Payments |   | Outstanding Loan Balance<br>(End of Period) |          |
| (Total loans received should also be shown in item 16, on summary page.)  |  |             |             |   |   |                               |                   |  |                  |   |   |          |
| (Total 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.)  |  |             |             |   |   |                               |                   |  |                  |   | <i>0</i>                                    |          |



## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

| 1. NAME OF CANDIDATE OR COMMITTEE  |       |             |  | 2. REPORT COVERING THE PERIOD             |                           |                      |  |
|--|-------|-------------|--|---|---------------------------|----------------------|--|
| Ray "Sonny" Weatherford  |       |             |  | FROM: 1-16-18                             |                           | TO: 3-31-18          |  |
| 3. 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 Name |  |   |                           |                      |  |
| Last Name/Business Name  |       |             |  |   |                           |                      |  |
| Address  |       |             |  |   |                           |                      |  |
| City   | State | Zip Code    |  |   |                           |                      |  |
| Description of Obligation  |       |             |  |   |                           |                      |  |
| First Name   |       | Middle Name |  |   |                           |                      |  |
| Last Name/Business Name  |       |             |  |   |                           |                      |  |
| Address  |       |             |  |   |                           |                      |  |
| City   | State | Zip Code    |  |   |                           |                      |  |
| Description of Obligation  |       |             |  |   |                           |                      |  |
| First Name   |       | Middle Name |  |   |                           |                      |  |
| Last Name/Business Name  |       |             |  |   |                           |                      |  |
| Address  |       |             |  |   |                           |                      |  |
| City   | State | Zip Code    |  |   |                           |                      |  |
| Description of Obligation  |       |             |  |   |                           |                      |  |
| First Name   |       | Middle Name |  |   |                           |                      |  |
| Last Name/Business Name  |       |             |  |   |                           |                      |  |
| Address  |       |             |  |   |                           |                      |  |
| City   | State | Zip Code    |  |   |                           |                      |  |
| Description of Obligation  |       |             |  |   |                           |                      |  |
| First Name   |       | Middle Name |  |   |                           |                      |  |
| Last Name/Business Name  |       |             |  |   |                           |                      |  |
| Address  |       |             |  |   |                           |                      |  |
| City   | State | Zip Code    |  |   |                           |                      |  |
| Description of Obligation  |       |             |  |   |                           |                      |  |
| 4. TOTALS  |       |             |  |   |                           |                      | (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.) |