CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT OCH. 27, 2018	2.a. NAMEOFC			3 HAM	
2.b. IF COMMITTEE, NAME OF CANDIDATE	717,20	~~~~	<u>LN W / JV </u>	3. ELECTION DA	ATE
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rusel Route 104 Center Point (+,	Henders	anville	State TW	Zip Code 37075	Phone 6/5-497-5522
CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	t than 4.a.) City		State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if Halderman - Ward				TREASURER (may	
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH _QUARTER	PRE- PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTA	YEAR-END AL SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD 9. (Check one)			DATE OF REPO	PRTING PERIOD	
 a. This campaign is exempt from detailer tures total \$1,000 or less for this report. b. This campaign is required to file a detand/or expenditures total more than \$ 	rting period. (Comp ailed financial disclo	olete items 12d., osure because o	12e. and 12f.)	•	•
10. I/we do solemnly swear or affirm that the intraccurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we spenefit of the candidate or for any other nonestimate the candidate of candidate. Signature of candidate	ns and expenditures wear or affirm that	s required to be no campaign co defined by the	reported by the contributions have federal internal federal fe	e candidate commit re been expended for revenue code.	tee by the Campaign
11. WITNESS SIGNATURE WITNESS SIGNATURE Signature of witness	10/27/	18 <u>M</u>	Dawn signat	Monk ure of witness	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT	***************************************			\$ <u>2,791.3</u>	<u>88</u>
b. TOTAL RECEIPTS THIS PERIOD		***************************************	••••••		
c. TOTAL DISBURSEMENTS THIS PERIOD			***************************************	\$ 200.0	0
d. BALANCE ON HAND (12.a. plus 12.b. mi	nus 12.c.)	***************************************	***************************************		\$ 2.791.38
e. TOTAL LOANS OUTSTANDING		***************************************	*****************		\$&
f. TOTAL OBLIGATIONS OUTSTANDING	•••••	•••••			.\$



SUMMARY PAGE - CANDIDATE

12 MARE OF CANDIDATE OF COMPUTER (1.5.15)	7	·
13. NAME OF CANDIDATE OR COMMITTEE (In Full) Arlene unnigham	FROM: /o/, / 19	ERING THE PERIO
RECEIPTS	11011/18	TO: 10/27/18
15. CONTRIBUTIONS (other than loans and interest)		
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u> </u>	-
b. Itemized Contributions (over \$100 from each source this period)	\$ 200.00	.
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.).	***************************************	\$ 200.00
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.)	**************************************	\$ 200.00
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, (jasoline)
Spansorships (2 schools PTOs) - \$ 200.	00	
(Gene Brown & Madison Creek)		
<u> </u>		
<u> </u>		
<u> </u>		
<u> </u>		
\$		
	_	
*		
<u> </u>	_	
Total of Expenditures (\$100 or less each payee)	.\$ 200.00	
b. Itemized Expenditures (Over \$100 each payee this period)	\$	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	***************************************	\$ 200.00
20. LOAN REPAYMENTS MADE THIS PERIOD	***************************************	\$
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	*******************************	\$ 200.00
22.IN-KIND CONTRIBUTIONS		
a. Unitemized in-kind contributions (\$100 or less from each source this period)	.\$	į
b. Itemized in-kind contributions (over \$100 from each source this period)	\$	i
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)		<u> </u>
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 item		\sim
· · · · · · · · · · · · · · · · · · ·		—



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	e -			2. REPORT COVER	1
Arlene Cunning	1-7,770	TO: 10/27/18 Amount			
TOTAL ITEMIZED CAMPAIGN CONTRIBUT COMPLETE THE APPROPRIATE ITEMS FOR E	1				
First Name	Middle Nam		Contribution Received For:	100 IIONI any contributor	Amount of Contribution
Last Name/Organization Name			☐ Primary Election 	General Election	ļ
Tennessee Keattors PAC				3 Ocheral Etechon	10-0-
Address 194 Ave So.			Runoff (Local Election	s Only)	200.00
Chy Washville	State	Zip Code 372/2	Date of Contribution	Aggregate This Election	
Occupation N/A			10/24/18	200.00	
Employer N/A					αυσ.υυ
First Name	Middle Narr	né	Contribution Received For		Amount of Contribution
Last Name/Organization Name	<u> </u>		Primary Election	General Election	
Address			Runoff (Local Election	ns Only)	·
City	City State Zip Code				Aggregate This Election
Occupation]		
Employer	<u> </u>	·- · · · · · · · · · · · · · · · · · ·	1		
First Name	9	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name	<u>. L</u> .		Primary Election	General Election	
Address			Runoff (Local Election	ns Only)	
City	State	Zip Code	Date of Contribution	Aggregate This Election	
Occupation					
Employer			-	1	
First Name	Middle Nam	e	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	<u> </u>		☐ Primary Election ☐	General Election	
Address		Runoff (Local Election	s Only)		
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of it this is the last page of contributions, this amount must be a second to the contributions.)					

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE ORIC	OMMITTEE	. /			2. REPORT COVE				
		//			/ • // 0	TO: 10/27/18			
3. TOTAL ITEMIZED IN-KIND C					·	<u> </u>			
4. COMPLETE THE APPROPRIATE	ITEMS FOR E	ACH ITEMI	ZED IN-KIND CONTRI	BUTION (in-kind contributions totaling	more than \$100 from any co	ntributor during the period)			
First Name	 0	Middle Na	me	In-Kind Contribution Receive Primary Election		Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Election	as Only)				
Address				Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution		· t			
Occupation	Employer		•						
First Name		4515 41		1.16.10.17.11.0		Value of In-Kind Contribution			
	First Name Middle Name			<u></u>	In-Kind Contribution Received For: 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					
Occupation	Employer	<u> </u>	-4··	1					
	<u> </u>								
First Name		Middle Na	ne -	In-Kind Contribution Received	For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name	-	-		Runoff (Local Election					
Address		· · · · · · · · · · · · · · · · · · ·		Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution		1			
Occupation	Employer	L ,	<u> </u>	†					
First Name		Middle Nan	ne	In-Kind Contribution Received Primary Election	For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Elections					
Address		-		Date of in-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Klad Contribution					
Occupation	Employer	L	<u> </u>	1		,			
									
First Name		Middle Name	•	In-Kind Contribution Received	For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Elections					
Address			····	Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer	 	<u> </u>	1					
5. TOTAL ITEMIZED IN-KIND CO	MITDIDITION	ID.							
 TOTAL HEMIZED IN-KIND CC (Carry forward to item 3. of next page if a (If this is the last page of in-kind contribu 	dditional pages o	f this form are	e used.) wn in item 22b. of summan	ω		$\mathcal{E}_{\mathcal{A}}$			
SS-1128 (Rev. 2/06)	, , , , , , , , , , , , , , , , , , , ,			Pane	24 of 7	RDA 1159			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OF COMMITTEE	nch	an		2. REPORT COVER FROM: /U////	THE PERIOD / Pro: 10/27/18
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU		Amount			
4. COMPLETE THE APPROPRIATE ITEMS FOR E	iod)				
First Name	Middle Nan	ne	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name					
Address]	!		
City	State	Zip Code			
First Name	Middle Name				Amount of Expenditure
Last Name/Business Name			1		
Address					
City	State	Zip Code		į	
First Name	Middle Nan	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	1		1		
Address		1		}	
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	6	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	·		1		
Address					
City	State	Zip Code			
First Name Middle Name			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		X			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDAT	TE OR COMMITTEE				·	-	2	. REPOR	T COVERI	NG THE PERIOD
1. NAME OF CANDIDATE OR COMMITTEE Whene Lenningham 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH FEMIZED LOAN (loans totaling more than \$100 from any)							1 10/1/18 1 11		TO: 10/27/18	
3. COMPLETE THE APP	PROPRIATE ITEMS	FOR EACH	I I EMIZ	ZED LOAN	(loans totaling n	nore than \$10	O from any sour	ce during the	period)	
Complete the Following for	the Source of the Loan									
First Name Middle Name									anding Loan Balance End of Period)	
Last Name/Organization Name				1						
Address				Loan Receiv						
City	State	Zip Code		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)			l Election			
	List All Endo	rsers or Gua	rantors f	or Above Loa	an (If more spa	ce is neede	d please attac	h a page)		
First Name		Middle Nar	ne		First Name				Middle N	апе
Last Name/Organization Name		<u></u>			Last Name/Org	janization Nar	ne			
Address					Address		 -			<u></u>
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding				·	Amount Guarar	nteed Outstand	đing			
First Name	- 	Middle Nan	10		First Name Middle Name					2-тие
Last Name/Organization Name					Last Name/Org	anization Nam	19		1	
Address	 -				Address	_				 -
City	 .	State	Zlp Co	xde	City State Zip Code					Zlp Code
Amount Guaranteed Outstanding		! _	<u> </u>		Amount Guaran	teed Outstand	ling		_1	<u> </u>
First Name		Middle Nam	0		First Name				Middle N	ame
Last Name/Organization Name		<u> </u>			Last Name/Orga	nization Nam	e		<u></u>	
Address					Address					
City		State	Zip Coo	de	City				State	Zip Code
Amount Guaranteed Outstanding		<u></u> .	<u> </u>		Amount Guarant	eed Outstand	ing		<u> </u>	<u> </u>
First Name	.,,,,,	Middle Name	9		First Name				Middle Na	me
Last Name/Organization Name			<u> </u>	Last Name/Organization Name						
Address					Address					
City	,, <u>, , , , , , , , , , , , , , , , , ,</u>	State	Zip Cod	íe	City				State	Zip Code
Amount Guaranteed Outstanding		L <u>.</u>	<u></u>		Amount Guarante	eed Outstandi	ng		<u> </u>	
Totals for all Loans (comp (Total loans received should also (Total loan payments should also	be shown in item 16, on st	ummary page.) ·		Outstanding Loa (Beginning of		Loans Received	Los Payn		utstanding Loan Balance (Englisherion)
(Total outstanding loan balance sh	ould also be shown in item	12.e. on front	page.)				\triangle		$\forall \downarrow$	

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OF COMPLETE THE ADDRESS	2. REPORT COVERING THE PERIOD						
OBLIGATION (obligations total	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)			FROM: 0/// Debt Incurred This Period	Payments This Period	Outstanding Balanc (End of Period)	
First Name	Middle N	ame			1		
Last Name/Business Name	<u> </u>						
Address			- 				
City	State	Zip Code					
Description of Obligation						<u> </u>	
First Name	Middle Na	ame					
Last Name/Business Name	<u></u>						
Address			- 				
City	State	Zip Code	 .				
Description of Obligation					·		
First Name	Middle Na						
Last Name/Business Name	IVIIII IV		_	;		·	
Address				1			
City			_				
	State	Zip Code					
Description of Obligation							
First Name	Middle Nan	ne					
Last Name/Business Name		<u> </u>	1		j		
Address			1]	- 1			
City	State	Zip Code	1	1			
Description of Obligation		<u> </u>	<u> </u>				
First Name	Middle Nam	e		- -			
ast Name/Business Name			-	ļ		i	
ddress		-	-				
City	State	Zip Code	-	ι			
escription of Obligation							
TOTALS			, 			,	
(Total from Outstanding Balance - (End of in item 23b. on summary page.)	of Period) column must a	also be shown				X	
1							