CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAMEOFCA	NDIDATE OR COMMITTEE			
10-29-18	Eddie	RODETSON			
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DA		
			Noven	ber 6,2018	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City .	State	Zip Code		
1049 Snoke Risa L	14	SourillE T.	37 9 75	615.68.6704	
4.b. CANDIDATE'S HOME ADDRESS (if differe		Laborating ' Ma'	21010	61-3-81 D 010A	
Street or Rural Route	City	State	Zip Code	Phone	
5. OFFICE SOUGHT (include district number, HENDERSONVILLE Cha	if applicable)	6. NAME OF POLITICAL T	REASURER (may	be candidate)	
7. CATEGORY OR REPORT (Check one)	FOURTH QUARTER	PRE- PRE-PRIMARY GENERAL	MID-YEAR SUPPLEMENTA	YEAR-END	
8.a. BEGINNING DATE OF REPORTING PERIOD OCTOBER 1, 2018		8.b. ENDING DATE OF REPOR		8	
9. (Check one)			,		
 This campaign is exempt from detail tures total \$1,000 or less for this rep 	ed disclosure because orting period. (Comple	contributions (including in-kinete items 12d., 12e. and 12f.)	d) received total \$1	,000 or less AND expendi-	
b. This campaign is required to file a de and/or expenditures total more than	tailed financial disclos \$1,000 for this reportin	ure because contributions (inc g period.	duding in-kind) rece	eived total more than \$1,000	
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.					
signature of candidate	10-29-19	signature of	political treasurer	10.59.18	
·			Panadar d'ouddioi	dato	
11. WITNESS SIGNATURE				<u> </u>	
Vat. Q.D.	10-29-18	M. Mil.	,	\n_ +0 = 0	
signature of witness	date	ysignatu	re of witness	10-69-2016 date.	
12. SUMMARY	FII	FD.	197 /		
12. SUMMARY a. BALANCE ON HAND LAST REPORT		ED P.M.	1361.3		
	A.M.	_ED 29.2018	1100.0	<u>o</u>	
a. BALANCE ON HAND LAST REPORTb. TOTAL RECEIPTS THIS PERIODc. TOTAL DISBURSEMENTS THIS PERIOD .	A.M. 	.2 <mark>9.2018</mark>	1270.8	<u>o</u>	
BALANCE ON HAND LAST REPORT TOTAL RECEIPTS THIS PERIOD	A.M. 	.2 <mark>9.2018</mark>	1270.8	<u>o</u>	
a. BALANCE ON HAND LAST REPORTb. TOTAL RECEIPTS THIS PERIODc. TOTAL DISBURSEMENTS THIS PERIOD .	A.M. OCT SUMME nin ElzECTION	29.2018 ROWWAIJY COMMIJS.UN	1270.8	<u>o</u>	



SUMMARY PAGE - CANDIDATE

Γ	2 NAME OF CANDIDATE OF CANDIDATE		
	3. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVER	
	RECEIPTS	FROM: 10.1.13	10:10-91-18
1	5. CONTRIBUTIONS (other than loans and interest)	•	
Ì	a. Uniternized Contributions (\$100 or less from each source this period)	\$ <u>450.00</u>	•
	b. Itemized Contributions (over \$100 from each source this period)	s <u>650.00</u>	
	c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	***************************************	100.00
1	6. LOANS RECEIVED THIS REPORTING PERIOD	***************************************	-0-
1	7. INTEREST RECEIVED THIS REPORTING PERIOD		~0-
	3. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		
	ISBURSEMENTS		
19	P. EXPENDITURES (other than loan payments)		
	a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.	g., printing, postage, ga	soline)
	Printing . 5.4	a	
-	tostage 5 50.6	5	
	Moter data base Summer Election 5 50.	%	
	s		
			
			
		_	
	<u> </u>		
	\$	_ _	
	<u> </u>	-	
-	otal of Expenditures (\$100 or less each payee)	s_125.07	
b.	Itemized Expenditures (Over \$100 each payee this period)	s 1145.81	
C.	TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	 \$	1270.88
	LOAN REPAYMENTS MADE THIS PERIOD		
	TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		
	IN-KIND CONTRIBUTIONS		1000
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)		
C,	TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)		A
	OBLIGATIONS		
a.	Unitemized Obligations Outstanding (\$100 or less each)	-0-	
	Itemized Obligations Outstanding (Over \$100 each)		
	TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 1		ا م
	To an array finds the showth Helli I.	<i>,</i>	

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Page _____ of ____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVER		
Eddle Koders	TO: 10 - 27 - 13			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				C C
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH ITEMIZED CONTRIBUTION (c	ontributions totaling more than \$	100 from any contributor	
First Name	Middle Name	Contribution Received For:	•	Amount of Contribution
Last Name/Organization Name		Primary Election	General Election	C
Address Address	7	Runoff (Local Elections Only)		150.00
CITY LIS LO STINGS	Cinto Zip Code	Date of Contribution		Aggregate This Election
HUNDERSON NIG	TN 37075	81.81.01		
Occupation Company		10.12.12		₹158.00
Employer				
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Primary Election RD General Election		1250.∞
Bruce			•	1920.00
1268 Novechest	Circle	Runoff (Local Election	s Only)	
MITAUADIO	State Zip Code 3706 G	Date of Contribution	:	Aggregate This Election
Occupation	م م مام	10.18		1050
Employer Home Improv	emanis			\$0,20.00
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		☐ Primary Election	General Election	.
Boger			00.00 to	
Address 4 Confried Place		Runoff (Local Election	s Only)	
Hendersonielle	State Zip Code 37.675	Date of Contribution		Aggregate This Election
Occupation		10.25-1	\$	بنم مند
Employer			\$250.00	
First Name	Middle Name	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		,		
5. TOTAL ITEMIZED CONTRIBUTIONS	of this form around?		·	\$650.00
(Carry forward to item 3. of next page if additional pages of (If this is the last page of contributions, this amount must				1000.00

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

				2. REPORT COVER	TO: 10.27.18
7 00 tr 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Amount	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
	-			to any payee during the peri	Amount of Expenditure
First Name	Middle Name		Purpose of Expenditure		Altiount of Expenditure
Last Name/Business Name Fox Frinting			Printing/Mass		Ollo
Address Old Lebardon Dirt Rd		3W	94321		
HETWITAGE	Tr.	37076			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			Perondia Mass		00.60E
Address			15	Milian	
City	State	Zip Code	7		
First Name	Middle Nam	ne	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	!		
rst 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			
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	of this form a	re used.) item 19b. of summarv.)			1145.81
f			-		