# **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT	la NAMECEC	ANDIDATE OD C	01414		<del></del>	<del></del>
10 77-18		andidateord		ICE AD	mbel	
2.b. IF COMMITTEE, NAME OF CANDIDATE	المنتابا			3. ELECTION D		
MIKE ARMIND				11-6-	18	
4.a. CAMPAIGN ADDRESS AND PHONE				<u> </u>		
Street or Rural Route	City	11	State	Zip Code	Pho	
769 MARLIN RO	WHITE	House	<u> </u>	37188	615	456-4031
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	t than 4.a.) City		State	Zip Code	Pho	one
F OFFICE COLICUIT (include district combon in			5 DOL 1910 4 4			<del>-</del> -
5. OFFICE SOUGHT (include district number, if	· · · · · ·	_ ^		TREASURER (may	y be candida	ate)
7. CATEGORY OR REPORT (Check one)	<u>use</u>	CAL	<u> </u>	MADOWS		
7. CATEGORY OR REPORT (Check one)		П				
FIRST SECOND THRD QUARTER QUARTER QUARTER	FOURTH	PRE-	PRE	MID-YEAR	-	EAR-END
QUARTER QUARTER QUARTER  8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY 8.b. ENDING	GENERAL DATE OF REPO	SUPPLEMENT RTING PERIOD	AL SUP	PLEMENTAL
10-1-18			77-	_		
9. (Check one)			7 7 1 -	1 4		
a.   This campaign is exempt from detailed	d disclosura bacaus	o contributions	(includina in kin	od) seesive ditable B	4 000 !	- AND II
tures total \$1,000 or less for this repo	rting period. (Comp	lete items 12d.,	12e. and 12f.)	iu) receiveu totai \$	1,000 or les	s AND expendi-
b. This campaign is required to file a det	ailed financial disclo	neura hacausa c	ontributions (in	chiding in kind) ro	national testal	mare than \$4 000
and/or expenditures total more than \$	1,000 for this report	ing period.	onunuduun (m	cidaling in-killa) tec	zerved totar	more than \$1,000
				<del>-</del>	-	
10. I/we do solemnly swear or affirm that the in	formation contained	in this campaig	n financial disc	closure report is tr	ue and that	this report is an
accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we s	ns and expenditure:	s required to be	reported by the	e candidate commi	ttee by the	Campaign
benefit of the candidate or for any other non	political purpose as	defined by the f	ederal internal	e been expended : revenue code.	ioi ine persi	onai financiai
$\sim 0.000$		()	^ /	14 /		
_ VENTUL	10-27-18	·	obut	on Ma	De	-10-27-18
signature of candidate	date		signature of	political treasurer		date
	·					
11. WITNESS SIGNATURE			0.	•		
(bulling)	10-27-1	o 1	24 1		,	10.30
signature of witness	date	8 <del>/</del>	airnet	laons		10-77-18
Signature of waters	uate		signati	ure of witness		date
12. SUMMARY		11 1				
	F			11150.1	<b>S</b>	
a. BALANCE ON HAND LAST REPORT		P Means pro-		\$ 143 8.	<del></del>	
b. TOTAL RECEIPTS THIS PERIOD	A.M.	nct3-0-20	118	; <u>1458.1</u> ; 3039.1	3.8	!
c. TOTAL DISBURSEMENTS THIS PERIOD		CO	YTKU	, 3039.8	'ব	
	SUI	MEKOO	MISSION	1		-0.15
c. TOTAL DISBURSEMENTS THIS PERIOD d. BALANCE ON HAND (12.a. plus 12.b. mi	nus 12.ch	TON COM	HALLOO	***************************************	s <u>/</u> 4	58.15
						0 -
e. TOTAL LOANS OUTSTANDING	***************************************				\$	
f. TOTAL OBLIGATIONS OUTSTANDING						) <b>~</b>
			******************	***************************************	\$	·



## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERIN	IG THE PERIO
TRIENDS OF MILE FLOWOLD	FROM: 10 - 1 - 18 TO	10-27-18
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)		7.5
a. Unitemized Contributions (\$100 or less from each source this period)	s -o -	
b. Itemized Contributions (over \$100 from each source this period)		
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$	3039.88
16. LOANS RECEIVED THIS REPORTING PERIOD		-0-
17. INTEREST RECEIVED THIS REPORTING PERIOD		~0-
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.,	Drinting postage good	lim a)
STRAMONDY /MADIND VIDED \$ 500.00		iirie)
RAPID WAISTBANDS \$ 378.00	-	
GERALD PRINTING BUTTONS \$ 161.8	-	
Roberson Court Times ADD \$ 600.00	-	
COLORADO GRILL RECEPTION 5 1400.0	-	
\$ 1900.5	-	
*	•	
\$	•	
\$		
<u> </u>		
Total of Expenditures (\$100 or less each payee)\$	-0-	
b. Itemized Expenditures (Over \$100 each payee this period)\$		
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		034.88
20. LOAN REPAYMENTS MADE THIS PERIOD		-0-
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		0 39.88
22.IN-KIND CONTRIBUTIONS		
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$	-0-	
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.)		< 29 88
23. OBLIGATIONS	3_0	351,51
a. Unitemized Obligations Outstanding (\$100 or less each)\$	-0 -	
b. Itemized Obligations Outstanding (Over \$100 each)\$		
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.		
The state of the s	)\$	
SS-1133 (Rev. 4/02)	Page	–

#### **ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE FRIENDS OF MI	ا می	10.10.1		2. REPORT COVER		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)						unt
4. COMPLETE THE APPROPRIATE ITEMS FOR EA		<u> १०३</u> ५ . ४३				
Frst Name	Middle Nam		Contribution Received For:	troe near any continuous		unt of Contribution
Last Name/Organization Name		<u>H</u>	Primary Election	General Election		00
GOODAL			2 00/10/12/	,	500.00	
Address 393 MAPW ST.			Runoff (Local Election	ns Only)		
City GALLATIN State TO 3 7066			Date of Contribution			regate This Election
Occupation			10-11-18			500. <sup>00</sup>
Employer GOODALL HOMES		_				
First Name	Middle Nam	H <del>C</del>	Contribution Received For	:	Amo	ount 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		Agg	regate This Election
Occupation	·	<del>J</del>	1			
Employer			1			
	L		Contribution Bossius Con		A	and Complete
First Name	Middle Nam	•	Contribution Received For		Amo	unt of Contribution
Last Name/Organization Name			Primary Election	General Election		
Address			Runoff (Local Election	ns Only)		
City	State	Zip Code	Date of Contribution		Agg	regate This Election
Occupation			]			
F						
Employer				į		
First Name	Middle Nam	e	Contribution Received For:	:	Amo	unt of Contribution
	Middle Nam	9	l _	General Election	Amo	unt of Contribution
First Name	Middle Nam	9			Amo	unt of Contribution
First Name  Last Name/Organization Name	Middle Nam	e Zip Code	Primary Election			unt of Contribution
First Name  Last Name/Organization Name  Address			☐ Primary Election ☐ ☐ Runoff (Local Election			
First Name  Last Name/Organization Name  Address  City			☐ Primary Election ☐ ☐ Runoff (Local Election			

## ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			<ol><li>REPORT COVERI</li></ol>	
FRIENDS OF MIKE	ALLOLD		FROM: 10 -1-19	TO: 10-27-18
3. TOTAL ITEMIZED IN-KIND CONTRIBUTION				2539.88
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH ITEMIZED IN-KIND CONTRIBU	TION (in-kind contributions totaling	more than \$100 from any contr	ibutor during the period)
First Name Tycepe	Middle Name	In-Kind Contribution Receive	d For: General Election	Value of In-Kind Contribution
Last Name/Organization Name To 中心し		Runoff (Local Election	ns Only)	378.00
	ms Way	Date of In-Kind Contribution	0-20-18	Aggregate this Election 3 7 8 . S.C.
City Hendersonvine	State 2 ZinCode 37072	Description of In-Kind Contribution	\m_1	
Occupation Employer	)	WRIST BA	<b>₩</b> 133	
SAFETT MANAGER CT	(australition)			
First Name Truck	Middle Name	In-Kind Contribution Receive	d For:  General Election	Value of In-Kind Contribution
Last Name/Organization Name				88.) 01
		Runoff (Local Election	ns Only)	Appropriate this Election
Address 104 N. LAURE		Date of In-Kind Contribution	7-20-18	Aggregate this Election 539.88
City Hensereducce	State A Zip Code 37072	Description of In-Kind Contribution	MIMIE	
Occupation Employer		CAMPAIGN	RUTTON	
SAFETT MANAGER CJ	LONSTOULTION			
First Name Dia Just	Middle Name	In-Kind Contribution Receive	d For:	Value of In-Kind Contribution
Last Name/Organization Name	I	Runoff (Local Election	_	600.00
Address On 1		Date of In-Kind Contribution		Aggregate this Election
City KRINICLEY L	State \ Zip Code	Description of In-Kind Contribution	<u> </u>	600.00
Occupation   Employer	State Zip Code 37:88	·	_	
	er , RED	NEUSPAPE	L AD	
		In-Kind Contribution Receive	d For	Value of In-Kind Contribution
First Name JASON	Middle Name CD416		General Election	
Last Name/Organization Name		Runoff (Local Electio	ns Only)	1400.00
	5 CHAPEZ RD-	Date of In-Kind Contribution		Aggregate this Election
City		Description of In-Kind Contribution		1400.00
WHITE HOUSE	State TD Zip Code 37188			
	J	Reception	<b>→</b>	
DOINGS OWNER		In-Kind Contribution Receiv	ed For:	Value of In-Kind Contribution
First Name	Middle Name		General Election	Tage of all rails oons boson
Last Name/Organization Name		Runoff (Local Election	ns Only)	
Address		Date of In-Kind Contribution		Aggregate this Election
City	State Zip Code	Description of In-Kind Contribution		
Occupation Employer	<del></del>	1		
	2010	<u> </u>	<del></del>	
5. TOTAL ITEMIZED IN-KIND CONTRIBUTION (Carry forward to item 3. of next page if additional pages)				2539.88
(If this is the last page of in-kind contributions, this amou	unt must be shown in item 22b. of summary			
SS-1128 (Rev. 2/06)		Pag	ge <u>4</u> of <u>1</u>	RDA 1159

### ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		Α		2. REPORT COVER	ING	THE PERIOD
FRIENDS OF A	1166	Aproux		FROM: 10-1-18	10	10-27-18
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU			(enter \$0 if first itemized pa	ge)	Am	ount 2539,88
4. COMPLETE THE APPROPRIATE ITEMS FOR E						
First Name Perce	Middle Na	me	Purpose of Expenditure		Am	ount of Expenditure
Last Name/Business Name  STRATON  Address  3) & Howy Ly	V4	Imponto	VIDEO			500.00
Address 3) & Hour Las			-			
CITY WHITE HOUSE	State	Zip Code 37188				
First Name	Middle Na	ma	Purpose of Expenditure		Am	ount of Expenditure
Last Name/Business Name		· · · · · · · · · · · · · · · · · · ·				
Address						
City	State	Zip Code				
First Name	Middle Na	me	Purpose of Expenditure		Āл	ount of Expenditure
Last Name/Business Name	·					
Address						
City	State	Zip Code				
First Name	Middle Na	me	Purpose of Expenditure		Am	ount of Expenditure
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middle Na	me	Purpose of Expenditure		Am	ount of Expenditure
Last Name/Business Name						
Address						\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
City	State	Zip Code				
First Name	Middle Na	me	Purpose of Expenditure		Am	ount of Expenditure
Last Name/Business Name						
Address		· · · <del></del> · ·				
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	s of this form it be shown i	are used.) n item 19b, of summary.)				500.00

### ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE						2. REPORT COVERING THE PERIOD				
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any					FF	ROM:	a	TO:	-37-18	
3. COMPLETE THE APPROPRIATE ITEM	AS FOR EACH I	EMIZ	ED LOAN (	oans totaling n	nore than \$100	from any source	e during the pe	eriod)		0 1 1 4
		_						·		
Complete the Following for the Source of the Lo First Name Middle	First Name Middle Name Outstanding Loan Balance Loans Loan Outstanding						Loan Balance			
							of Period)			
Last Name/Organization Name									_	ے ت 
Address			Loan Receive	od For:			Date of Lo	an		
City State	Zip Code		Primary Election General Election							
			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	â		First Name				Middle	Name	
Last Name/Organization Name				Last Name/Or	ganization Nan	ne				
Address	· <del>- ·</del>		<del></del>	Address						
City	State	Zip C	ode	City				State		Zip Code
Amount Guaranteed Outstanding				Amount Guara	anteed Outstan	ding				
First Name	Middle Nam	θ	<u>.</u>	First Name				Middle	Name	
Last Name/Organization Name			<del>-</del>	Last Name/Or	ganization Nar	TAS		_!		<u></u>
Address	<u>-'-</u>			Address						
City	State	Zip C	ode	City State						Zip Code
Arnount Guaranteed Outstanding		1		Amount Guaranteed Outstanding						
First Name	Middle Nam	е		First Name				Middle	Nam	3
Last Name/Organization Name	<u> </u>			Last Name/O	ganization Nar	те				
Address	<u></u>			Address						
City	State	Zip C	Code	City				State		Zip Code
Amount Guaranteed Outstanding				Amount Guar	anteed Outstan	ding				
First Name	Middle Nam	e		First Name				Middle	Name	)
Last Name/Organization Name	I			Last Name/O	rganization Nar	ne		_L,		<u> </u>
Address				Address	<u>.</u>	·	<b></b>			<u> </u>
City	State	Zip C	Code	City				State		Zip Code
Amount Guaranteed Outstanding				Amount Guar	anteed Outstan	ding				
4. Totals for all Loans (complete on last pas (Total loans received should also be shown in item 1	<ol><li>on summary page</li></ol>	<del>)</del> .)		Outstanding (Beginning	oan Balance of Period)	Loans Received		ean ments	Out	standing Loan Balance (End of Period)
(Total loan payments should also be shown in item 2 (Total outstanding loan balance should also be shown	!O. on summary page	3.)								-0-

# ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
FRIENDS OF MI	KO E	12WOLD	Outstanding Balance	FROM: 10 - 1 - Debt Incurred		0-27-18
<ol> <li>COMPLETE THE APPROPRIATE ITEMS F OBLIGATION (obligations totaling more than</li> </ol>	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)				Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Nan	ne				
Last Name/Business Name						
Address						-0 -
City	State	Zip Code		_		
Description of Obligation	•					
First Name	Middle Nar	ne .				
Last Name/Business Name	<u></u>	· · · · · · · · · · · · · · · · · · ·				
Address						-0-
City	State	Zip Code	·			
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name	<u> </u>		-			-0-
Address						
City	State	Zip Code				
Description of Obligation						. <u>-</u>
First Name	Middle Nar	me				
Last Name/Business Name	·	<del>_ ,</del>	1			-0-
Address						
. City	State	Zip Code				
Description of Obligation						
First Name	Middle Nar	ne	-			
Last Name/Business Name	.1					
Address			1			-0-
City	State	Zip Code	]			
Description of Obligation	<u> </u>	-				,
4. TOTALS (Total from Outstanding Balance - (End of Period)	വിവത്ര തല	t also be shown				-0-
in item 23b. on summary page.)		. moo se silonii				

Page \_\_\_\_\_ of \_\_\_\_

RDA 1159