CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. DATEC	FREPORT	2.a. NAME OF CA		OMMITTEE			
101:	27//8	PAT PAV	upbell	<u> </u>			_
2.b. IF COI	MMITTEE, NAME OF CANDIDATE				3. ELECTION DATE	2018	
					11/4/2	9/0	-
	AIGN ADDRESS AND PHONE or Rural Route	City		State	Zip Code	Phone	
192	Lebecca Dr.	Henderso	rville 1	TN_	37075 6	15-1714-17	<u>7</u> \$
	DATE'S HOME ADDRESS (if different	than 4.a.)			Zip Code	Phone	
Street	or Rural Route	City	•	State	Zip Code	FILONE	
5 OFFIC	E SOUGHT (include district number, it	applicable)	6. NAME O	F POLITICAL T	REASURER (may be car	ndidate)	٦
	dorman Ward Z SORY OR REPORT (Check one)_		Cy.	nthig	Garrin		╝
7. CATEC	GORY OR REPORT (Check one)			\forall	П		
FIRS		FOURTH	PRE- PRIMARY	GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL	
QUAR 8.a. BEGINI	TER QUARTER QUARTER NING DATE OF REPORTING PERIOD	QUARTER	8.b. ENDING	DATE OF REPOR		OO I CLINESVII C.	┨
	10-1-18		10-	27-18			_
9. (Check o	ne)			<u> </u>			1
a. 🔀	This campaign is exempt from detailed tures total \$1,000 or less for this repo	d disclosure becaus	se contributions	(including in-kin	d) received total \$1,000 d	or less AND expendi-	
•							
b. 🗖	This campaign is required to file a de and/or expenditures total more than \$	tailed financial disclost, 61,000 for this repor	osure because o ting period.	contributions (in	cluding in-kind) received t	total more than \$1,000	'
accur Finan bene	do solemnly swear or affirm that the in ate accounting of campaign contribution dal Disclosure Act. Additionally, I/we fit of the candidate or for any other nor described by the candidate	ons and expenditure swear or affirm that	s required to be no campaign co	preported by the contributions have federal internal	e candidate committee by e been expended for the	THE Caltipaly!	-
11. WITN	ESS SIGNATURE						
1 Amer	nese Durance	10/23112	7.	Bolly &	Inter	10-29-18	7
- Sylver	signature of witness	date	دنــ	signat	ure of witness	date	_
		II ET)				\dashv
12. SUMM	L	-11	P.M.		s 317.99		
a. B	ALANCE ON HAND LAST REPORT .	- O Å		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•		ŀ
b. T	OTAL RECEIPTS THIS PERIOD A.M.	-0C1 30501	,0 		s 208.75		
c. T	OTAL RECEIPTS THIS PERIOD	KNMER CO	IMISSION	-	\$ 425,83		
d. B	ALANCE ON HAND (12.a. plus 12.b	OM. COM			\$ _	100-91	
			-			Ó	
e. T	OTAL LOANS OUTSTANDING					di .	\dashv
f. T	OTAL OBLIGATIONS OUTSTANDING		***************************************		\$-	9	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COV	ERING	THE PERIOD
PAT CAMPREU	FROM: 10 1 18	та: ,	10/27/18
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	• •		, ,
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>50.00</u>		
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>416-74</u>	_	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	***************************************	\$	526-74
16. LOANS RECEIVED THIS REPORTING PERIOD	•••••	\$	NONE
17. INTEREST RECEIVED THIS REPORTING PERIOD	***************************************	\$	NONE
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	••••••••••••••	\$	526.74
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,	gasoli	ne)
HHE BASEBALL DONATION \$ 100.00			
Hendesmithe Honebaud meals \$ 100,000			
SAME Club CANDY Trick Treat & Park \$ 217.08			
there \$ 8.75	- 		
\$			
\$			
<u> </u>			
<u> </u>			
Total of Expenditures (\$100 or less each payee)		-	
b. Itemized Expenditures (Over \$100 each payee this period)		-	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)			2 <i>5.8</i> 3
20. LOAN REPAYMENTS MADE THIS PERIOD		\$ 🚣	NONE
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		.\$ 4	25.83
22.IN-KIND CONTRIBUTIONS			
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.)	.\$	
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	12.f.)	.\$	
		\longrightarrow	

SS-1133 (Rev. 4/02)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF ANDIDATE OR COMMITTEE			2. REPORT COVERI	
PAT CAMBOOC			FROM: 10-1-18	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONG EDOM DDECEDING DAG	E (anter \$Ω if first itemized n		Amount of
TOTAL TIEMIZED CAMPAIGN CONTRIBUT COMPLETE THE APPROPRIATE ITEMS FOR EA				
	Middle Name	Contribution Received For:	Too from any combination	Amount of Contribution
First Name Scott	Militare Hadrie	•		
Last Name/Organization Name		Primary Election	General Election	126.74
Sprouse			- 0-1-1	
Address		Runoff (Local Election	s Only)	
City //	State Zip Code 770 75	Date of Contribution		Aggregate This Election
Hendorsonville	TW 37075	10-23-1	つ	
Occupation		10001	′	
Employer Employee				
First Name /)	Middle Name E .	Contribution Received For:		Amount of Contribution
Christine	E .		.	
Last Name/Organization Name		☐ Primary Election	General Election	50-00
Sprout		Runoff (Local Election	ıs Only)	7
Address 211 Elnora Dr	· · · · · · · · · · · · · · · · · · ·			
City Hendersonville	State Zin Code 37075	Date of Contribution		Aggregate This Election
Occupation Reficed		10-1-18		
Employer				
First Name	Middle Name	Contribution Received For		Arrount of Contribution
	Middle Name	_	_	- [
Total Normalization Norma		Primary Election	General Election	Arrount of Contribution
Last Name/Organization Name HENDERSONVILLE FIRE	EFILHTERS ASSA	Primary Election Pac Fund	General Election	- [
Last Name/Organization Name HENDERSONVILLE FIRE	EFILHTERS ASSA	Primary Election Par Fund Runoff (Local Election	General Election	250,00
Last Name/Organization Name HENDERSONVILLE FIRE	EFILHTERS ASSA	Primary Election Par Fund Runoff (Local Election	General Election as Only)	- [
Last Name/Organization Name HENDERSONVILLE FIRE	EFILHTERS ASSA	Primary Election Par Fund Runoff (Local Election	General Election as Only)	250,00
Last Name/Organization Name HENDERSONVILLE FIRE Address 242 W- MAIR/ St. City Howders on vivle T Occupation	EFILHTERS ASSA	Primary Election Par Fund Runoff (Local Election	General Election	250,00
Last Name/Organization Name HENDERSONVILLE FIR! Address 242 W- MAIQ! St. City Honders on vive T	EFILHTERS ASSA	Primary Election Par Fund Runoff (Local Election	General Election as Only)	250,00
Last Name/Organization Name HENDERSONVILLE FIR! Address 242 W- MAIQ St. City Honders on vive T Occupation Employer	EFILHTERS ASSA PMB 407 State Code 37075	Primary Election Par Fund Runoff (Local Election Date of Contribution	General Election as Only)	250,00
Last Name/Organization Name HENDERSONVILLE FIRE Address 242 W- MAIR/ St. City Howders on vivle T Occupation	EFILHTERS ASSA	Primary Election Par Fund Runoff (Local Election	General Election as Only)	250,00
Last Name/Organization Name HENDELSONVILLE FIRST Address L42 W- MAIQ! St. City Honslers on ville T Occupation Employer First Name	EFILHTERS ASSA. PMB 407 State 20 Zip Code 3 70 75 Middle Name	Primary Election Par Fund Runoff (Local Election Date of Contribution	General Election as Only)	Aggregate This Election Amount of Contribution
Last Name/Organization Name HENDERSONVILLE FIRE Address 242 in Mary St. City Henders Invive T Occupation Employer First Name Last Name/Organization Name SILMUST ASSOCIATION C.	EFILHTERS ASSA. AMS 407 State Zip Code 37075 Middle Name Realtors	Primary Election Par Fund Runoff (Local Election Date of Contribution Contribution Received For:	General Election as Only) 25/18 Deeneral Election	250,00
Last Name/Organization Name HENDERSONVILLE FIRE Address 242 in Mary St. City Henders Invive T Occupation Employer First Name Last Name/Organization Name SILMUST ASSOCIATION C.	EFILHTERS ASSA. AMS 407 State Zip Code 37075 Middle Name Realtors	Primary Election Par Fund Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election as Only) 25/18 Deeneral Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name HENDERSONVILLE FIRE Address 242 W- MAIR/St. City Henders Invive T Occupation Employer First Name Last Name/Organization Name JUMMER ASSOCIATION C.	EFILHTERS ASSA. AMS 407 State Zip Code 37075 Middle Name Realtors	Primary Election Par Fund Runoff (Local Election Date of Contribution Contribution Received For:	General Election as Only) 25/18 Deeneral Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name HENDERSONVILLE FIRE Address 242 W- MAIR/St. City Henders Invive T Occupation Employer First Name Last Name/Organization Name JUMUE ASSISTING SEA	EFILHTERS ASSA. PMB 407 State Zip Code 3 7075 Middle Name Recttors L Or ste B.	Primary Election Par Fund Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election as Only) 25/18 Deeneral Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name HENDERSONVILLE FIRE Address 242 W- MAIR/St. City Henders Invival T Occupation Employer First Name Last Name/Organization Name JUMUE ASSOCIATION of Address Explusive flex City Hendersonville 1	EFILHTERS ASSA. PMB 407 State Zip Code 3 7075 Middle Name Recttors L Or ste B.	Primary Election Par Fund Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election as Only) 25/18 Deeneral Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name HENDELSONVILLE FIRE Address 242 in-Maig/5t. City Honders on ville T Occupation Employer First Name Last Name/Organization Name Summer Association of Address Service City Henderson in a Control of Coupation Cocupation	EFILHTERS ASSA. PMB 407 State Zip Code 3 7075 Middle Name Recttors L Or ste B.	Primary Election Par Fund Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election as Only) 25/18 Deeneral Election	Aggregate This Election Amount of Contribution
Last Name/Organization Name HENDELSONVILLE FIRE Address 242 in-Maig/5t. City Honders on ville T Occupation Employer First Name Last Name/Organization Name Summer Association of Address Service City Henderson in a Control of Coupation Cocupation	EFILHTERS ASSA. PMB 407 State Zip Code 3 7075 Middle Name Recttors L Or ste B.	Primary Election Par Fund Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election as Only) 25/18 Deeneral Election	Aggregate This Election Amount of Contribution Aggregate This Election
Last Name/Organization Name HENDERSONVILLE FIRE Address 242 in Mara/5t. City Henders Invite T Occupation Employer First Name Last Name/Organization Name Summer Association of Address 25 Explusive Plan City Henderson ine Occupation Employer	EFILITERS ASSA. AMS 407 State V Zip Code 37075 Middle Name Realtors L Or ste B. State V Zin Code 37075	Primary Election Par Fund Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election as Only) 25/18 Deeneral Election	Aggregate This Election Amount of Contribution

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR C	OMMITTEE			FROM:	TO:	HE PERIOD		
At Campbel	<u>\</u>			110m10/1/)&	Amo	10/2///O		
3. TOTAL ITEMIZED IN-KIND CO	ONTRIBUTIONS FRO	M PRECEDING PA	GE (enter \$0 if first itemized page	e)	<u> </u>	SP		
4. COMPLETE THE APPROPRIATE	ITEMS FOR EACH ITEM	AIZED IN-KIND CONT	RIBUTION (in-kind contributions totaling	more than \$100 from any con	ntributor	during the period)		
First Name	Middle N	lame		In-Kind Contribution Received For: Primary Election General Election Value of In-Kind Contrib				
Last Name/Organization Name			Runoff (Local Election	Runoff (Local Elections Only)				
Address			Date of In-Kind Contribution	Date of In-Kind Contribution Aggregate this E				
City	State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer							
First Name	Middle t	Varne	In-Kind Contribution Receive	ed For: General Election	Valu	e of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Election	ns Only)	<u> </u>			
Address		<u></u>	Date of In-Kind Contribution		Aggr	egate this Election		
City	State	Zip Code	Description of In-Kind Contribution	1				
Occupation	Employer							
				15.	lu:	a at le Mad Care II		
First Name Middle Name			In-Kind Contribution Receive	ed For: General Election	Valu	e 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	1				
Occupation	Employer				_			
First Name	Middle	Name		In-Kind Contribution Received For: Primary Election General Election				
Last Name/Organization Name			☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)					
Address	<u></u>		Date of In-Kind Contribution					
City	State	Zip Code	Description of In-Kind Contribution	Description of In-Kind Contribution				
Occupation	Employer	<u> </u>	_					
					1	- 4 le (de) 6 e e e e		
First Name	Middle)	Vame	_	In-Kind Contribution Received For: Value of In-Kind Contribut				
Last Name/Organization Name			Runoff (Local Electio	Runoff (Local Elections Only)				
Address			Date of In-Kind Contribution		Aggr	egate this Election		
City	State	Zip Code	Description of In-Kind Contribution	1				
Occupation	Employer							
TOTAL ITEMIZED IN-KIND ((Carry forward to item 3. of next page)	if additional pages of this for	m are used.)				NONE		
(If this is the last page of in-kind control SS-1128 (Rev. 2/06)	noutions, this amount must b	e snown in item 22b, of su		ge of	<u> </u>	RDA 1159		
00 1125 (1.01. 2.00)				•				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVER	
PA CAMPOUL			FROM: 10/1/13	Ambunt 10/27/13
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	JRES FROM PRECEDING PAG	E (enter \$0 if first itemized pa	age)	Sill O
4. COMPLETE THE APPROPRIATE ITEMS FOR E		···		riod)
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name NNS 303E6ALL		Sponsor		100.00
Address Chero Yee Rd]		
city Hendersonville	State Zip Code 37075			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Nendurson J. U. Harrebou	d neds	Contributi	on	100,00
381 W. More St.				
Herdersonville	State Zip Code 3:2075			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name SAMS (1MD		Crowdy Fo	~	
201 Indian LOVE A	Jul.	Trick or T	Treat	217.08
Hendersonlk	State Zip Code TW 3 2075	in the Par	·k	
First Name	Middle Name	Purpose of Expenditure	· -	Amount of Expenditure
Last Name/Business Name		Purchase	checles	8.75
Address 101 Spring house	ct.			
City Hendersonville	State Zip Code 370 75			
First Name	Middle Name	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 page) (If this is the last page of expenditures, this amount must	s of this form are used.) It be shown in item 19b, of summary.)			425.83

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDAT	E OR COMMITTEE										HE PERIOD
PAT Court	bely						FROM	/I: 5}{{\\$	3	ار 10	27/18
3. COMPLETE THE APP	PROPRIATE ITEMS	FOR EACH I	TEMIZ	ED LOAN (loans totaling n	nore than \$100 f					
Complete the Following for	the Source of the Loan			,							
First Name	Middle Nar	тие		Outstanding L (Beginning o		Loans Received	Loai Payme		Outsta (anding (End c	Loan Balance f Period)
Last Name/Organization Name	<u> </u>										
Address				Loan Receive	ed For:		<u> </u>	Date of Loan			· · · · · · · · · · · · · · · · · · ·
Audress				☐ Primary		☐ General F	Election				
City	State	Zip Code		☐ Runoff (Local Elections	Only)					
	List All Endo	rsers or Guan	antors fo	or Above Loa	n (If more spa	ice is needed	please attach a	page)			
First Name		Middle Nam	8		First Name		<u> </u>		Middle	Vame	
Last Name/Organization Name		<u> </u>			Last Name/Or	ganization Nam	8				
Address		-			Address		<u></u>				
City	·····	State	Zip C	ode	City		-		State		Zip Code
Amount Guaranteed Outstandin	g	_!_			Amount Guara	inteed Outstand	ing				
First Name	-	Middle Nam	6		First Name				Middle I	Name	
Last Name/Organization Name					Last Name/Or	ganization Nam	e		<u></u>		
Address	·	,			Address					_	
City	<u> </u>	State	Zip C	ode	City				State		Zip Code
Amount Guaranteed Outstandin	g	<u>, </u>	1	-	Amount Guari	anteed Outstand	ing				
First Name		Middle Nam	8		First Name				Middle	Name	
Last Name/Organization Name		<u> </u>			Last Name/O	ganization Nam	e				
Address					Address						
City		State	Zip C	ode	City				State		Zip Code
Amount Guaranteed Outstandin	g	_1			Amount Guar	anteed Outstand	ing				
First Name		Middle Nam	10		First Name				Middle	Name	
Last Name/Organization Name	<u></u>	_1	 -		Last Name/O	ganization Nam	ie	-			
Address					Address	 					
City		State	Zip C	ode	City		<u></u>		State		Zip Code
Amount Guaranteed Outstandin	ng				Amount Guar	anteed Outstand	ling				
4. Totals for all Loans (co	mplete on last page o	of itemized lo	ans)		Outstanding I	oan Balance of Period)	Loans Received	Loa Paym		Out	tanding Loan Balan (End of Period)
(Total loan payments should a (Total outstanding loan balance	also be shown in item 20. or	n summary page	a.)		\mathcal{L}		Ø	Ø			Ø
SS-1132 (Rev.	4/02)				7	P	age of	φ			RDA 1159

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		•		2. REPORT COV	ERING THE PER	OD
1. NAME OF CANDIDATE OR COMMITTEE				FROM: 10-1-1		27-18
COMPLETE THE APPROPRIATE ITEMS FOR OBLIGATION (obligations totaling more than person/vendor at the end of the reporting person/vendor.)	\$100 owe		Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
	Middle Nan					·
First Name	Middle Mat	iro				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Nar	ne				
Last Name/Business Name				e		
Address	-					
City	State	Zip Code	,		!	
Description of Obligation						
First Name	Middle Nar	ne				
Last Name/Business Name	l			}		
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Nar	TIĐ				
Last Name/Business Name		_,,	7		1	
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Nar	пе				
Last Name/Business Name		 ,		•		:
Address		· 				
City	State	Zip Code				
Description of Obligation	•					,
TOTALS (Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)	olumn mus	at also be shown	Ø	β	Ó	\Diamond
SS-1127 (Rev. 4/02)		-		Page	of <u>7</u>	RDA 1159