## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

For State and Local Candidates
For Single-Candidate Committees

| 1. DAT  | EOF REPORT 2.a. N  | AME OF CANDIDATE OR | 17 1            | 1 G. 1                   | Na yor                |
|---|--|---------------------|-----------------|--------------------------|-----------------------|
| 2 h IF (  | COMMITTEE, NAME OF CANDIDATE   | David               | Kimbreu         | 3. ELECTION DATE         | in yor                |
|   |  |                     |                 |                          |                       |
|   | IPAIGN ADDRESS AND PHONE et or Rural Route City                            |                     | State           | Zip Code                 | Phone                 |
|   | 109 Hazel Path Site2   | Hendersonville      | TN              | 37035                    | 615-822-833           |
|   | DIDATE'S HOME ADDRESS (if different than 4.a<br>et or Rural Route City     | .)                  | State           | Zip Code                 | Phone                 |
| 5. OFF  | FICE SOUGHT (include district number, if applicabe)  Mayor- Henderson, 116 | '                   | of Political T  | REASURER (may be ca      | andidate)             |
| F   | 11/01  | URTH PRE-           | PRE-<br>GENERAL | MID-YEAR<br>SUPPLEMENTAL | YEAR-END SUPPLEMENTAL |
| 8.a. BEG  | ARTER QUARTER QUARTER QU<br>SINNING DATE OF REPORTING PERIOD<br>1—16—19    | 8.b. ENDIN          | GDATE OF REPO   | RTING PERIOD             |                       |
| 9. (Check one)  |  |                     |                 |                          |                       |
| a. 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.)   |  |                     |                 |                          |                       |
| b. 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 cardidate or for any other nonpolitical purpose as defined by the federal internal revenue code.    Column |  |                     |                 |                          |                       |
| 11. WITNESS SIGNATURE   |  |                     |                 |                          |                       |
| 1   | signature of witness   | late                | signa           | ture of witness          |                       |
| 12. SU  | MMARY  |                     |                 | 9001 70                  | ,                     |
| a.  | BALANCE ON HAND LAST REPORT  | FILE                |                 | s 100324                 | ,                     |
| b.  | TOTAL RECEIPTS THIS PERIOD   |                     |                 | \$                       |                       |
| c.  | TOTAL DISBURSEMENTS THIS PERIOD  | JUL 1 1 2010        | Р.М.<br>3       | \$                       | 9,883.29              |
| d.  | BALANCE ON HAND (12.a. plus 12.b. minus 12                                 | UMNER COUP          | 1TY             | \$                       | 7-001                 |
| e.  | TOTAL LOANS OUTSTANDING  | CTION COMMI         | SSION           | \$                       |                       |
| f.  | TOTAL OBLIGATIONS OUTSTANDING  |                     |                 | \$                       |                       |