## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

# For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 24 Jy 2018		ANDIDATE OR O		chool Board	· verdenken
2.b. IF COMMITTEE, NAME OF CANDIDATE  Jerry W Apple				3. ELECTION DATE 2 August 2	018
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 593-A Rogues Fork Road	City Bethpag	e	State TN	Zip Code 37022	Phone 615 450-26
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route 1098 Dutch Creek Road	than 4.a.) City <b>Westmore</b>	land	State TN	Zip Code 37186	Phone 615 504-9316
5. OFFICE SOUGHT (include district number, if District 11 School Board S	• •		OF POLITICAL	TREASURER (may be	candidate)
7. CATEGORY OR REPORT (Check one)    X	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERAL	☐ MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD  1 July 2018			July 201		
a. This campaign is exempt from detailed tures total \$1,000 or less for this report b. This campaign is required to file a detard/or expenditures total more than \$10. I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act/Additionally, I/we sherefit of the candidate for any other/non signature of candidate.	ailed financial discletion, ailed financial discletion, and for this report formation contained instance and expenditure swear or affirm that	osure because ting period.  d in this campa is required to b and campaign of	contributions (in tight financial dise reported by the contributions have federal internal	closure report is true a e candidate committee re been expended for the	d total more than \$1,000  nd that this report is an by the Campaign
11. WITNESS SIGNATURE  Signature of witness	7/24/18 date	( 4	signal	ture of witness	7/24/18 date
12. SUMMARY				108.20	
a. BALANCE ON HAND LAST REPORT	FILE	<b>D</b>		360.25	
b. TOTAL RECEIPTS THIS PERIODA.M		P.M		459.00	
c. TOTAL DISBURSEMENTS THIS PERIOD.  d. BALANCE ON HAND (12.a. plus 12.6)	IMNER COL	JNTY		\$	9.45
e. TOTAL LOANS OUTSTANDING	TION COMN	<del>/IISSION</del>			0.00
f. TOTAL OBLIGATIONS OUTSTANDING				\$	0.00



### SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Jerry W Apple	14. REPORT COVERING THE PERIOD
RECEIPTS	FROM: 1 Jul 18 TO: 23 July 18
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$
b. Itemized Contributions (over \$100 from each source this period)	s 360·25
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	s <u>360.25</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	s <u> </u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	s
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	s <u>360.75</u>
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, gasoline)
\$	
\$	
\$	
\$	
	<del>_</del>
<b>*</b>	
<b>\$</b>	
<u> </u>	<del></del> -
\$	<del></del>
<u> </u>	
Total of Expenditures (\$100 or less each payee)	\$
b. Itemized Expenditures (Over \$100 each payee this period)	s 459.0°
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	
20. LOAN REPAYMENTS MADE THIS PERIOD	\$
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$
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	n 12.f.)\$

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

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

	Ε		4	NEFORT COVER	ING THE PERIOD			
Jerry Apple		FROM, JJ	TO: 2371 11					
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	TIONS FR	PAGE (enter \$0 if first itemized p	age)	Amount \$0				
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEMI	ZED CONTRIBUTION	N (contributions totaling more than \$	100 from any contribute	or)			
First Name Jerry & LeeAnne	Middle Nam	ne	Contribution Received For:	· · ·	Amount of Contribution			
Last Name/Organization Name Apple	I		Primary Election	Primary Election General Election				
Address 1098 Dutch Creek Road			Runoff (Local Election	Runoff (Local Elections Only)				
City Westmoreland	State TN	Zip Code 37186	Date of Contribution 9 July 2018 \$373.98	Date of Contribution 9 July 2018 \$373.98				
Occupation Jerry = Retired LeeAnne = Edu	cator				\$2134.23			
Sumner County Board of E	dcuati	on						
First Name	Middle Nar	ne	Contribution Received F	or:	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			<del></del>					
Employer			-					
<b>i</b>			1					
First Name	Middle Nam	ne	Contribution Received F	or.	Amount of Contribution			
	Middle Nam	•	Contribution Received F		Amount of Contribution			
Last Name/Organization Name	Middle Nam	ne	Primary Election	General Election	Amount of Contribution			
		ne	☐ Primary Election ☐ Runoff (Local Election	General Election				
Last Name/Organization Name	Middle Nam	Zip Code	Primary Election	General Election	Amount of Contribution  Aggregate This Election			
Last Name/Organization Name Address			☐ Primary Election ☐ Runoff (Local Election	General Election				
Last Name/Organization Name Address City			☐ Primary Election ☐ Runoff (Local Election	General Election				
Last Name/Organization Name  Address  City  Occupation		Zip Code	☐ Primary Election ☐ Runoff (Local Election	General Election  Is Only)				
Last Name/Organization Name  Address  City  Occupation  Employer	State	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For	General Election  Is Only)	Aggregate This Election			
Last Name/Organization Name  Address  City  Occupation  Employer  First Name	State	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For	General Election  S Only)  General Election	Aggregate This Election			
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name	State	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:	General Election  S Only)  General Election	Aggregate This Election			
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name  Address	State Middle Nam	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:  Primary Election  Runoff (Local Election	General Election  S Only)  General Election	Aggregate This Election  Amount of Contribution			
Last Name/Organization Name  Address  City  Occupation  Employer  First Name  Last Name/Organization Name  Address  City	State Middle Nam	Zip Code	Primary Election  Runoff (Local Election  Date of Contribution  Contribution Received For:  Primary Election  Runoff (Local Election	General Election  S Only)  General Election	Aggregate This Election  Amount of Contribution			

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

1. NAME OF CANDIDATE OR CO	NG THE PERIOD							
Jerry	TO: 23 J							
3. TOTAL ITEMIZED IN-KIND CON	Amount							
4. COMPLETE THE APPROPRIATE ITE	MS FOR EA	CH ITEMIZI	ED IN-KIND CONTRIBU	TION (in-kind contributions totaling n	nore than \$100 from any co	ntributor during the period)		
First Name  Aiddle Name  ast Name/Organization Name				In-Kind Contribution Receive	/alue of In-Kind Contribution			
Last Yourier of ganzauori (vanire				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					•		
First Name		/liddle Nam	e	In-Kind Contribution Receive	ed 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					
Occupation	Employer		•					
First Name Middle Name			In-Kind Contribution Receive		Value of In-Kind Contribution			
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							
	· · · · ,							
First Name		/liddle Nam	e	In-Kind Contribution Receive		Value 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				
Occupation	Employer			:				
	,	. m //m *57						
First Name		Middle Name		In-Kind Contribution Receiv		Value of In-Kind Contribution		
Last Name/Organization Name				Runoff (Local Elections	only)			
Address			Date of In-Kind Contribution	· - · ·	Aggregate this Election			
City		Starte	Zip Code	Description of In-Kind Contribution				
Occupation	Employer							
TOTAL ITEMIZED IN-KIND CON     (Carry forward to item 3. of next page if add     (If this is the last page of in-kind contribution)	litional pages o	f this form are		)				

#### ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	$\sim$		2. REPORT COVER				
Jeiry	FROM: IJ.	TO: 235-12					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	RES FRO	M PRECEDING PAGE	(enter \$0 if first itemized page	ae)	Amount \$0		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)							
First Name		Purpose of Expenditure	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Amount of Expenditure			
					Amount of Experiorities		
Last Name/Business Name USPS			Stamps				
Address		Clamps		\$459.00			
City Gallota	State TN	Zip Code 37066	<u> </u>				
First Name	Middle Nan	Ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	<u> </u>						
	<u>-</u>						
Address							
City	State	Zip Code					
					-		
First Name	Middle Nan	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					
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure		
- · · · · · · · · · · · · · · · · · · ·			, , , , , , , , , , , , , , , , , , ,		,		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nam	е	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	<u> </u>						
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							

#### **ITEMIZED STATEMENT OF LOANS - CANDIDATE**

1. NAME OF CANDIDATE OR	COMMITTEE				-		2.	REPORT (	COVER	RING T	HE PERIOD
3. COMPLETE THE APPROP	Terry	A	ام	e						TO:	371,
3. COMPLETE THE APPROP	RIATE IT <b>EMI</b> S F	OR EACH	TEMIZ	ZED LOAN (	loans totaling r	nore than \$10	0 from any source	during the pe	riod)		
Complete the Following for the Sor	urce of the Loan					,					
				Outstanding L (Beginning	Loan Balance Loans Loan Outstanding Loan B of Period) Received Payments (End of Period					Loan Balance f Period)	
Last Name/Organization Name	L									•	,
Address		•		Loan Receive		☐ Genera	l Election	Date of Loa	MT		
City	State	Zip Code		]	Runoff (Local Elections Only)						
	List All Endor	sers or Guara	antors fo	or Above Loa	n (If more spa	ice is neede	d please attach	a page)			
First Name	•	Middle Name	<del>)</del>		First Name				Middle	Name	
Last Name/Organization Name					Last Name/On	ganization Na	me				
Address					Address						
City		State	Zip Ca	ode	City	<del></del>			State		Zip Code
Amount Guaranteed Outstanding		<u> </u>			Amount Guara	nteed Outstan	iding		•	4	
First Name		Middle Name	<del>}</del>		First Name				Middle	Name	
Last Name/Organization Name		•			Last Name/On	ganization Na	me		•		
Address					Address						
City		State	Zip Co	ode	City State Zip Code					Zip Code	
Amount Guaranteed Outstanding					Amount Guara	nteed Outstar	ding				
First Name		Middle Name	,	. "	First Name		•	•	Middle	e Name	
Last Name/Organization Name		•			Last Name/On	ganization Na	me				
Address			·····	<del>.</del>	Address						
City		State	Zip Co	ode	City			<u>.</u>	Starte		Zip Code
Amount Guaranteed Outstanding		······································	· · · · ·		Amount Guara	nteed Outstan	ding			L	
First Name	<u>'</u>	Middle Name	;		First Name				Middle	Name	
Last Name/Organization Name		<u>.                                    </u>			Last Name/Or	ganization Na	me		1		
Address					Address		· · ·				
City	<u>.</u>	State	Zip Co	ode	City				State		Zip Code
Amount Guaranteed Outstanding			1		Amount Guara	nteed Outstar	ding		t	1	
4. Totals for all Loans (complete (Total loans received should also be sh	own in item 16. on:	summary page.	)		Outstanding L (Beginning		Loans Received	Loa Paym			anding Loan Balance End of Period)
(Total loan payments should also be sh (Total outstanding loan balance should a								<u> </u>			



#### **ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE	7	0	1	2. REPORT COV	ERING THE PER	IOD
	181	14 App	Je	FROM: /JJ	то:	2354
COMPLETE THE APPROPRIATE ITEMS F     OBLIGATION (obligations totaling more that     person/vendor at the end of the reporting p	OR EACH 1 \$100 ow	I (TEMIZED	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Nar	me				
Last Name/Business Name			1			
Address			-			
City	State	Zip Code	1			
Description of Obligation		•	·	<u></u>		·
First Name	Middle Nar	те		_		
Last Name/Business Name			<b>]</b>			
Address			]			
City	State	Zip Code				
Description of Obligation	<del>*</del>	<del></del>		<u> </u>	<b>.</b>	
First Name	Middle Nar	me				
Last Name/Business Name	<u> </u>	<u> </u>	•			
Address					<b>.</b>	
City	State	Zip Code			<b>.</b>	
Description of Obligation						
First Name	Middle Nar	me				
Last Name/Business Name	<u> </u>					
Address			•		Ē	
City	State	Zip Code	1			
Description of Obligation	1				<b>.</b>	
First Name	Middle Nar	me				
Last Name/Business Name	I					
Address			-			
City	State	Zip Code				
Description of Obligation	<u> </u>	<u> </u>				
						, ,
4. TOTALS	saluma	t alea ha sharra		]		[
(Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)	Joiumin Mus	Laiso de Shown				