* Amended * CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

				
1. DATE OF REPORT	2.a. NAMEOFCANDIDATEOR		,	
7-5-18	Committee to	Elect	Loren	Echols
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION D	
leren Echols			5-1-	- 12
4.a. CAMPAIGN ADDRESS AND PHONE		· · · · · · · · · · · · · · · · · · ·		10
Street or Rural Route	Çîty	State	Zip Code	Phone
129 Fountain Brooke	Menderson 11e	71/ 7	57075	615.306.6065
4.0. CANDIDATE'S HOME ADDRESS (if different	than 4.a.)		, , , , , ,	010 790 (Johns
Street or Rural Route	City	State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if	applicable) 6. NAME	OF POLITICAL T	DEACUDED (The second secon
County Commission		OF POLITICAL T 1019 LE	2Marb	y be candidate) 'YEJ
7. CATEGORY OR REPORT (Check one)				
FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH PRE-	PRE-	MID-YEAR	
8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER PRIMARY 8.b. ENDING	GENERAL GDATE OF REPOR	SUPPLEMENT TING PERIOD	TAL SUPPLEMENTAL
4-1-18	4	-21-1	B	
9. (Check one)				
a. This campaign is exempt from detailed tures total \$1,000 or less for this repo	d disclosure because contributions tring period. (Complete items 12d	s (including in-kind I., 12e. and 12f.)	d) received total s	1,000 or less AND expendi-
b. III This campaign is required to file a det	ailed financial disclosure because	contributions (inc	dudios is kind)	special databases the second data
and/or expenditures total more than \$	1,000 for this reporting period.	containations (sto	roding nekind) re	ceived total more than \$1,000
I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we beneal of the candidate or for any other non.	ns and expenditures required to b swear or affirm that no campaign (e reported by the contributions have	candidate comm	ittee by the Compoien
	- / c	receral internal r	evenue code.	
From	719118 (Patricia	A John	Dre 7.9-18
signature of candidate	/date/	signature of	political treasure	date
11. WITNESS SIGNATURE	·			
(Vitti CO a	- 101 - 0			
Comin Covan	7/9/2018 (1 mathia	72/22	AD 7-9-12
signature of witness	date	signatu	re of witness	date
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT			<u> </u>	<u>95</u>
b. TOTAL RECEIPTS THIS PERIOD		に り 。	1,000=	<u> </u>
c. TOTAL DISBURSEMENTS THIS PERIOD	A.M. 	P.M.	L1227	<u> </u>
d. BALANCE ON HAND (12.a. plus 12.b. m				: 1967 ¹⁸
	ELFCHONOS	UUNTY		4
e. TOTAL LOANS OUTSTANDING	ELECTION COM	MISSION		s_ -0
	······································			4
f. TOTAL OBLIGATIONS OUTSTANDING		********************		\$ 1,5705°

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Committee to Elect Loven Echols	14. REPORT COVERING THE PERIOD
RECEIPTS	111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
15. CONTRIBUTIONS (other than loans and interest)	5500
a. Unitemized Contributions (\$100 or less from each source this period)	1100 6 00
b. Itemized Contributions (over \$100 from each source this period)	1 . 20
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	
16. LOANS RECEIVED THIS REPORTING PERIOD	
17. INTEREST RECEIVED THIS REPORTING PERIOD	1 - 00
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 1,600=
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)
Payment processing \$ 5.2	<u>.</u>
Campaign Supplies \$ 92	<u>-</u>
meet & greet supplies \$ 1315	<u> </u>
Lunch for volunteers \$ 82	<u>e</u>
Printing \$ 562	<u>9</u>
<u>Data</u> \$ 50=	2
Event Sponsorships \$ 750	
Havertising \$ 1000	
\$	
Total of Evpanditures (\$100 or less such name)	. 597 36
Total of Expenditures (\$100 or less each payee)	
b. Itemized Expenditures (Over \$100 each payee this period)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	7,
20. LOAN REPAYMENTS MADE THIS PERIOD	110077
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 11100-
22. IN-KIND CONTRIBUTIONS	~ 2°
Unitemized in-kind contributions (\$100 or less from each source this period)	~
b. Itemized in-kind contributions (over \$100 from each source this period)	2/1
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.	s <u>5</u> 80
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	
b. Itemized Obligations Outstanding (Over \$100 each)	s 1570°
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	

Page 2 of 7

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	ert i	loven A	Thals	2. REPORT COVER	TO: 4.21.18			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT					Amount			
4. COMPLETE THE APPROPRIATE ITEMS FOR E								
First Name Kara	Middle Nan		Contribution Received For:		Amount of Contribution			
Last Nama/Organization Name Gayre#			Primary Election	\$1500				
Address 1100 Willis Bra	nch	Pd.	Runoff (Local Election	s Only)	200			
"Goodjettsville	CAY Goodjettsville TN 20037072			Date of Contribution				
Occupation RN		 ·	4-15	\$250,00				
Nashrille Fertil	144	Center] '		400			
First Name	Middle Nur		Contribution Received For		Amount of Contribution			
Last Name/Organization Name TN Real Tys PA	<u> </u> 	·- ·	Primary Election C	General Bection	\$7.00			
	<u>c</u> 2 50	wth	Runoff (Local Election	ns Only)	\$200			
City Nashville	72000 37212	Date of Contribution	Aggregate This Election					
Occupation			4-6	\$200.00				
Employer				* 200.				
First Name	Middle Nam	¢	Contribution Received For:		Amount of Contribution			
First Name Last Name/Organization Name	Middle Nam	¢		General Election	Amount of Contribution			
	Middle Nam	e		General Election	Amount of Contribution			
Last Name/Organization Name	Middle Nam	Zīp Code	Primary Election	General Election	Amount of Contribution Aggregate This Election			
Last Name/Organization Name Address			☐ Primary Election [General Election				
Last Name/Organization Name Address City			☐ Primary Election [General Election				
Last Name/Organization Name Address City Occupation		Zip Code	☐ Primary Election [General Election				
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election	Aggregate This Election			
Last Name/Organization Name Address City Occupation Employer	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 Neddle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary 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 Neddle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election	General Election s Only) General Election	Aggregate This Election Amount of Contribution			

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OF	COMMITTEE	<u>_</u> 9	-1000	Coven Echo 5 FROM: 4/1	ERING THE PERIOD /				
					TO: 4/21/18				
				GE (enter \$0 if first itemized page)					
	IE IIEMS FOR E	ACHIIEN	IZED IN-KIND CONT	RIBUTION (in-kind contributions totaling more than \$100 from any o	contributor during the period)				
First Name Middle Name Last Name/Organization Name			ame	In-Kind Contribution Received For: Primary Election General Election	Value of in-Kind Contribution				
				Runoff (Local Elections Only)					
Address				Date of in-Kind Contribution Aggregate this Election					
City	Starte Zip Code			Description of In-Kind Contribution	<u> </u>				
Оссирабоя	Employer .	•							
First Name		Middle N.	ame	In-Kind Contribution Received For:	Value of In-Kind Contribution				
Last Name/Organization Name		, /		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)					
Address			<u> </u>	Date of In-Kind Contribution	Aggregate this Election				
City	 -	State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer	 -							
First Name		Middle N	атте	In-Kind Contribution Received For:	Value of In-Kind Contribution				
Last Name/Organization Name		1	- \	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)					
Address				Date of In-Kind Contribution Aggregate this Election					
City		State	Zip Code	Description of In-Kind Contribution					
Оссиравол	Employer	1		_/					
First Name		Middle Na	me	In-Kind Contribution Received For: Primary Election	Value of In-Kind Contribution				
Last Name/Organization Name				Runoff (Local Elections Only)					
Address			·	Dute of In-Kind Contribution	Aggregate this Election				
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer	·	<u> </u>						
First Name	1	Middle Nan	ne	In-Kind Contribution Received For:	Value of In-Kind Contribution				
ast Name/Organization Name				Primary Election	THE OF STREET				
uddress			-	Runoff (Local Elections Only) Date of In-Kind Contribution	Aggregate this Election				
Dity		State	Zip Code	Description of In-Kind Contribution	And after the clation				
Occupation	Employer			S SANDARI M RILITAN ON IN STREET					
 TOTAL ITEMIZED IN-KIND (Carry forward to item 3, of next page (if this is the last page of in-kind cont 	il additional pages d	af this form a	re used.) own in item 22b. of sumn	mary.)					
SS-1128 (Rev. 2/06)	· · · · · · · · · · · · · · · · · · ·			Proce LF at 7	<u> </u>				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE COMMITTEE	1 10	2. REPORT COVER					
	FROM: 41.18	TO: 4.21.18					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITE				0			
First Name	Middle Ne		(expenditures totaling more than \$100 to any payee during the period) Purpose of Expenditure Amount of Expenditure				
	MICOR NE	me	Purpose or Expenditure	Amount of Expenditure			
Last Name Support Systems			mailer	\$530.4			
Address 445 Myatt Dr.			Maner	•			
Address 445 Myatt Dr	**	37/15					
First Name	Middle Na	me	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name	<u> </u>		•				
Address							
City	State	Zip Code	1				
First Name	Middle Na	m a	Purpose of Expenditure		Amount of Expenditure		
Last NamerBusiness Name	<u> </u>						
Address							
City	State	Zip Code					
First Name	Middle Nam	10	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code			į		
First Name	Middle Nam	8	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Name			7. "	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				53041			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD FROM: TO: /						
Committee to Clect loven 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans						nore than \$1	00 from any sou	urce during the p	eriod)	14/21/13	
Complete the Following for the S	Source of the Loan	1				-					
			Outstanding Loan Balance Loans (Beginning of Period) Received				Loan Outstanding Loan Baland Payments (End of Period)				
Last Name/Organization Name									,,		
Address				Loan Receiv	oan Received For: Date of Loan						
City	State	tate Zip Code			nary Election General Election						
	List All Endo	mom or Cuer		<u> </u>	(Local Elections		1.1		_/	<u> </u>	
First Name	LISI AN ENGO	Middle Nam		or Above Loa	n (If more spa	ice is need	ed please atta	ach a page)			
		Middle Hairi	e		First Name				Middle	Name	
Last Name/Organization Name		,			Last Name/Org	ganization Na	ame		k		
Address					Address		/			 	
City		State	Zip Co	ode	City		<u> </u>		State	Zip Code	
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding						
First Name	First Name Middle Name				First Name Middle Name					Name	
Last Name/Organization Name					Last Name/Organization Name						
Address				$\overline{/}$	Address						
City	· <u> </u>	State	Zip Co	de	City	<u>.</u>		<u> </u>	State	Zip Code	
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding						
First Name		Middle Name	,	_	First Name				Middle	Name	
Last Name/Organization Name		<u>/</u>			Last Name/Organization Name						
Address					Address						
City	State Zip Code			de	City				State	Zip Code	
Amount Guaranteed Outstanding	_	<u> </u>	.1		Amount Guaranteed Outstanding						
First Name Middle Name					First Name Middle Name					Name	
Last Name/Organization Name				Last Name/Organization Name							
Address			_	Address							
City		State	Zip Coo	de	City	_		,,,, ,,	State	Zip Code	
Amount Guaranteed Outstanding	<u> </u>	<u></u>	1		Amount Guaran	teed Outstan	ding		I		
Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				Outstanding Loa (Beginning of		Loans Received	Loar Payme		Outstanding Loan Balance (End of Period)		



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COV	RIOD	
Committee to El	ect	Loven	Gehols	FROM: 4//	TO:	4/21
3. COMPLETE THE APPROPRIATE ITEMS F	OR EAC	HITEMIZED	Outstanding Balance	Debt Incurred	Payments	Outstanding Balance
OBLIGATION (obligations totaling more than \$100 owed to any		(Beginning of Period)	This Period	This Period	(End of Period)	
person/vendor at the end of the reporting p	eriod)					
First Name	Middle Na	ime				
Douglas Printi	ast Name/Business Name Douglas Printing			1,000	(SY	1/555
Address 2601 Winford	1/1.	<u> </u>	0	(OS)2		05
	TV	<u>e</u>				
^{city} Nashville	State	Zip Code 37211				
Description of Obligation	1.1	10.0.1		J		
	Tanaa					
First Name	Middle Na	me				
Last Name/Business Name						
Office Support	<u>- Su</u>	stems		1-1-20	0	54720
Address 445 Myatt 1	r.		6	15414		277
City	State	Zin Code	•	~ '		
Madison	TN	37115				
Description of Obligation				· · · · · · · · · · · · · · · · · · ·		
Mailina Servia	28					
First Name	Middle Na	me				
Last Name/Business Name			Ð	3678		~^
Facebook	-05	2/0780				
Address / Hacker Way						
City Carlo						
cin mento Park	STA	Zip Code 94025				
Description of Obligation						
,			·			
First Name	Middle Na	me				,
Last Name/Business Name						
Address						
City	State	Zip Code				:
Description of Obligation						
						_
First Name	Middle Na	ne				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
					_	
4. TOTALS	.1			10-7.50	12	1, 50
(Total from Outstanding Balance - (End of Period) or in item 23b. on summary page.)	Diumn mus	t also be shown	0	15/07	0	15705°
• · • • · ·			<u> </u>			