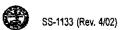
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

	ANDIDATE OR COMMITTEE		7.1				
	onny Weath	er for A					
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE					
4.a. CAMPAIGN ADDRESS AND PHONE		8-2-18					
Street or Rural Route City	State	Zip Code	Phone				
1654B Hwy2315. Bethpaje	TN	37022 (615	-)841-4024				
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City	State	Zip Code	Phone				
5. OFFICE SOUGHT (include district number, if applicable) Sheriff	6. NAME OF POLITICAL TR	REASURER (may be can	didate)				
7. CATEGORY OR REPORT (Check one)	- Chergh Co						
FIRST SECOND THIRD FOURTH	PRE- PRE-	MID-YEAR	YEAR-END				
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	PRIMARY: GENERAL 8.b. ENDING DATE OF REPORT	SUPPLEMENTAL :	SUPPLEMENTAL				
July 24,2018	5 optember	35, 2018					
9. (Check one)	V						
a. This campaign is exempt from detailed disclosure becaus tures total \$1,000 or less for this reporting period. (Comp) received total \$1,000 o	r less AND expendi-				
b. This campaign is required to file a detailed financial disclo	,	ه استنامه السانا ما معالما	-t-1 than 64 000				
and/or expenditures total more than \$1,000 for this report	ing period.	uding in-kina) received to	otai more than \$1,000				
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 candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. Common Com							
11. WITNESS SIGNATURE							
Cinda Williamson 10-5-18 signature of witness date	Cindy U	e of witness	10-5-18 date				
12. SUMMARY		09					
a. BALANCE ON HAND LAST REPORT	EVED 5	30,216.					
b. TOTAL RECEIPTS THIS PERIOD	0.5-2018						
c. TOTAL DISBURSEMENTS THIS PERIODSUMNE		<u> 2, 670. =</u>					
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	COMMISSION	s <u>.</u>	8,064.09				
e. TOTAL LOANS OUTSTANDING		s	0				
f. TOTAL OBLIGATIONS OUTSTANDING		\$ —	0				

SUMMARY PAGE - CANDIDATE

3. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT COVERING THE PERIOD				
Roy "Sonny" Weatherford	FROM: 7/24/18	TO: 9/30/18				
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)						
a. Uniternized Contributions (\$100 or less from each source this period)\$						
b. Itemized Contributions (over \$100 from each source this peri	_					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add	\$					
16. LOANS RECEIVED THIS REPORTING PERIOD	\$					
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$					
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 lis	sted by category - e	.g., printing, postage,	gasoline)			
<u> Dues</u>	\$ 100.	<u> </u>				
	_ \$!			
	_ \$					
	_ \$					
	_ \$					
	_ \$ <u></u>					
	_ \$	*******				
	\$					
	. \$		1			
Total of Formations (0400 and		00				
Total of Expenditures (\$100 or less each payee)		♦ ℃	-			
b. Itemized Expenditures (Over \$100 each payee this period)			- 2~2~			
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.6						
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 12.f.)\$						



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVER					ING THE PERIOD		
Ray "Sonny" Wear	ther-	6 d		FROM: 7/24/18	TO: 9/30/18 Amount		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	0						
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)							
First Name	Middle Na	me	Purpose of Expenditure	•	Amount of Expenditure		
Last Name/Business Name Diane Black for Goven or		Contribution		\$1,000.			
P.O. Box 121557							
Nashuille	State	Zip Code 372/2					
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Hendersonsille Rotary	0/	ub	Dues		a 150. 00		
Address O. Box 473			Dues		150.		
Hendersonville	State	Zip Code 37077					
First Name	Middle Nar	ne	Purpose of Expenditure	,	Amount of Expenditure		
Last Name/Business Name Marsha Blackburn +	or 50	enate			* 500.		
P. D. Box 3750			Cont	tri bution			
Brentwood	State T.~~	Zip Code 37024	1				
First Name	Middle Nan		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Henderson wille Chamb	er of	- Commerce			#190.00		
City	State	ite 104 Zip Code	l.) ues	, , , , ,		
Hendersonville	TN	37075	D				
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure		
Last NamerBusiness Name CoodleHS ville Chambo Address	er 6-	- Commerce			#130.		
100 N. Main St. D). State	Zıp Code	1.) wes	, 50		
Goodlettsuille	7~	37072					
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address			:				
City	State	Zip Code	<u>:</u>				
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3, of next page if additional pages)	of this form o	re usert)	:		# 1970 °		
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					1,970.		