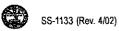
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

	1				
1. DATE OF REPORT 10 - 12 - 20	EILEEN	ANDIDATEOR			
2.b. IF COMMITTEE, NAME OF CANDIDATE	010-2-	<u> </u>	<u> </u>	3. ELECTION DA	TE
N/A					B-2020
4.a. CAMPAIGN ADDRESS AND PHONE				<u> </u>	
Street or Rural Route	City	1	State	Zip Code	Phone / 15 , 000 - 1/21
4.b. CANDIDATE'S HOME ADDRESS (if different	GALLAT t than 4 a)	1111	71	37066	615-989-7631
Street or Rural Route	City		State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if	fapplicable) 半2		OF POLITICAL T	TREASURER (may	be candidate)
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE-	PRE- GENERAL	MID-YEAR SUPPLEMENTA	YEAR-END
8.a. BEGINNING DATE OF REPORTING PERIOD			DATE OF REPO		
7-01-2020		9	-30-20	20	
9. (Check one)			· · · · · · · · · · · · · · · · · · ·		
a. This campaign is exempt from detaile tures total \$1,000 or less for this report. b. This campaign is required to file a detailed and/or expenditures total more than \$	orting period. (Comp tailed financial discle	plete items 12d osure because	f., 12e. and 12f.)		
10. I/we do solemnly swear or affirm that the ir accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other nor signature of candidate	ons and expenditure swear or affirm that	es required to b no campaign	pe reported by the contributions have a federal internal	e candidate commit ve been expended for	tee by the Campaign
11. WITNESS SIGNATURE				_	
	10/13/20	,	/2 _	-//	10/13/10
signature of witness	date	L.	signat	ture of witness	date
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT	F!	ıı ED		.s <u>-0-</u>	_
b. TOTAL RECEIPTS THIS PERIOD	AM			s 620-	+ 1249.58 (ME)
c. TOTAL DISBURSEMENTS THIS PERIOD.	0C1	1 3 2020		s 1869.	58
d. BALANCE ON HAND (12.a. plus 12.b. n	ninus 12.c.) 	NER COUNT	Y SION		\$
e. TOTAL LOANS OUTSTANDING					Λ <u> </u>
f. TOTAL OBLIGATIONS OUTSTANDING					\$0-

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)			ERING THE PERIOD
EILEEN GEORGE		FROM: 7-1-2010	TO: 9.30.2020
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)			
a. Unitemized Contributions (\$100 or less from each source this pe	riod)	\$ 20-	
b. Itemized Contributions (over \$100 from each source this period).			_
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15	a. and 15.b.)	***************************************	\$ 1869.58
16. LOANS RECEIVED THIS REPORTING PERIOD	*************************		\$ <u>- 0 -</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>-0-</u>		
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item	\$ 1869.58		
DISBURSEMENTS			
19. EXPENDITURES (other than loan payments)			
a. Expenditures (\$100 or less each payee this period) (must be listed	by category - e	e.g., printing, postage,	gasoline)
GALLATIN CHAMBER MEMBER SHIP	\$ <i>150-</i>		
ELECTION OFFICE (FLASH DENE)	\$ 15-		
JOSH BRATCHER (LOGO)	\$ <u>300 -</u>		
GREATER GALLATIN BOOTH FOR FESTIVAL	s 125-		
DO DAT COMMUNICATIONS (SIGNS BYLLONSTSHIER)	\$ 1100.	10	
BALLATIN CHAMBER AD	\$ 100		
FIRST TN CHECKS	s 18.	88	
	\$		
	\$	·	
	· · · · · · · · · · · · · · · · · · ·		
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. a	ınd 19.b.)	••••	\$
20. LOAN REPAYMENTS MADE THIS PERIOD			\$ -0-
20. LOAN REPAYMENTS MADE THIS PERIOD	item 12.c.)	•••••	\$ 1869.58
22.IN-KIND CONTRIBUTIONS			
a. Uniternized in-kind contributions (\$100 or less from each source thi	is period)	\$	<u> </u>
b. Itemized in-kind contributions (over \$100 from each source this per	iod)(boi	\$	_
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add	d 22.a. and 22.	b.)	\$0-
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.) (mus	t be shown i ite	m 12.f.)	\$0 -



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTE EILEGN EORGE	2	PROM: 7-1-2020 TO: 9-30. ZO 20				
-	MA DECEDING DA	CE (anter \$0 if first itemized a		Amount		
TOTAL ITEMIZED CAMPAIGN CONTRIBU COMPLETE THE APPROPRIATE ITEMS FOR 1				· · · · · · · · · · · · · · · · · · ·	- O-	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (CITIES Name Middle Name Middle Name Last Name/Organization Name R 1 DD Y Address			Contribution Received For: Primary Election Runoff (Local Elections Only)		Amount of Contribution	
City 1 6./2545001./.(16	State /	Zip Code	Date of Contribution		Aggregate This Election	
City HENDERSON VILLE State 7 Zip Code 37075 Occupation SELF EmployED Employer			9-15-2	j		
First Name	Middle Nan	ne	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name	!		Primary Election	Primary Election General Election		
Address			Runoff (Local Election	Runoff (Local Elections Only)		
City	State	Zip Code	Date of Contribution	· · · · · · · · · · · · · · · · · · ·	Aggregate This Election	
Occupation		1	1			
Employer			1			
First Name	Middle Nam	ne	Contribution Received	Contribution Received For:		
Last Name/Organization Name			Primary Election	General Election		
Address						
Address		 	Runoff (Local Election	ons Only)		
Address City	State	Zip Code	Runoff (Local Election	ons Only)	Aggregate This Election	
	State	Zip Code		ons Only)	Aggregate This Election	
City	State	Zip Code		ons Only)	Aggregate This Election	
City	State Middle Nan				Aggregate This Election Amount of Contribution	
City Occupation Employer			Date of Contribution Contribution Received For			
City Occupation Employer First Name			Date of Contribution Contribution Received For	or: □ General Election		
City Occupation Employer First Name Last Name/Organization Name			Contribution Received For Primary Election	or: □ General Election		
City Occupation Employer First Name Last Name/Organization Name Address	Middle Nan	ne	Contribution Received For Primary Election	or: □ General Election	Amount of Contribution	
City Occupation Employer First Name Last Name/Organization Name Address City	Middle Nan	ne	Contribution Received For Primary Election	or: □ General Election	Amount of Contribution	