CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

4 DATE OF DEDODE	AND PART OF SOLUTION		· · · · · · · · · · · · · · · · · · ·			
1. DATE OF REPORT $1076/2020$ 2.a. NAME OF C	ANDIBATE OR COMMITTEE					
2.b. IF COMMITTEE, NAME OF CANDIDATE	y	3. ELECTION DATE	020			
4.a. CAMPAIGN ADDRESS AND PHONE						
Street or Rural Route 127 Wood vale Dr. Hendorson	ville, TN	Zip Code 37075 615-	Phone 824 - 2022			
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) Alderman, Ward Z	6. NAME OF POLITICA	LTREASURER (may be o	andidate)			
7. CATEGORY OR REPORT (Check one)	PRE- PRE-	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b. ENDING DATE PEREI	PORTING PERIOD LOCATION CONTRACTOR CONTRACT				
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 containe accurate accounting of campaign contributions and expenditure Financial Disclosure Act. Additionally, I/we swear or affirm that benefit of the candidate or for any other nonpolitical purpose as signature or candidate 10 10 10 10 10 10 10 1	es required to be reported by no campaign contributions to defined by the federal interest.	the candidate committee I have been expended for the	by the Campaign			
11. WITNESS SIGNATURE	1	4				
signature of witness date		nature of witness	(0/26/20 date			
12. SUMMARY		1800	26			
a. BALANCE ON HAND LAST REPORT		6804	,			
b. TOTAL RECEIPTS THIS PERIOD FILED		\$ [10]	-			
c. TOTAL DISBURSEMENTS THIS PERIOD	ማበ ማበ	s 209494	-			
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	NINTY	\$	5809 32			
e. TOTAL LOANS OUTSTANDING	MMISSION	\$	-0-			
f. TOTAL OBLIGATIONS OUTSTANDING		\$	- v-			

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD FROM: 101 7020					
DECEMBLE	סבטליבלטי ^{TO: סבטלילסן}					
RECEIPTS 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)\$						
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	s <u>1100</u>					
16. LOANS RECEIVED THIS REPORTING PERIOD	s <u>- 0 -</u>					
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ -0-					
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	s <u>(100 = </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)					
\$						
<u> </u>						
\$						
\$						
*						
\$						
\$						
\$						
	-^					
Total of Expenditures (\$100 or less each payee)	\$ - 0 -					
b. Itemized Expenditures (Over \$100 each payee this period)						
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)						
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ = 0 = 1					
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.)\$ O-						
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		
Switt prouse			FROMIO/1/2020	TO: 10/ ZY/200		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount O -					
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)						
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Bosiness Name Haltord Company Address 11 Spance Lane		ma:		209494		
City Nashville	State /V	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 Nan	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code	1			
First Name	ame Middle Name		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 Nan	е	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name]				
Address						
City	State	Zip Code				
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)						