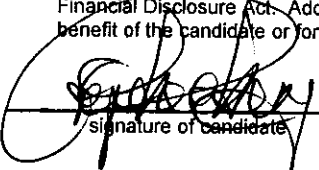
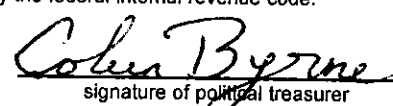
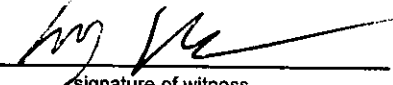
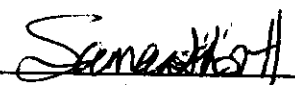


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT SEPT 30TH		2.a. NAME OF CANDIDATE OR COMMITTEE ANGIE HEDBERG	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE NOV-4-2014	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 112 TRAIL RIDGE WAY HENDERSONVILLE TN 37075 386.383.6717			
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) WARD 3 ALDERMAN		6. NAME OF POLITICAL TREASURER (may be candidate) COLEEN BYRNE	
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING DATE OF REPORTING PERIOD SEPT 30TH 2014	
9. (Check one) a. <input type="checkbox"/> 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. <input type="checkbox"/> 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 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. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">  signature of candidate </div> <div style="text-align: center;"> 9.30.14 date </div> <div style="text-align: center;">  signature of political treasurer </div> <div style="text-align: center;"> 9/30/14 date </div> </div>			
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">  signature of witness </div> <div style="text-align: center;"> Sept 30 2014 date </div> <div style="text-align: center;">  signature of witness </div> <div style="text-align: center;"> 9/30/14 date </div> </div>			
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>0</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>1029.55</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>1029.55</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>0</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>169.55</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>169.55</u>	



FILED

A.M. OCT 02 2014 P.M.

SUMNER COUNTY
ELECTION COMMISSION

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) ANGIE NEUBERG	14. REPORT COVERING THE PERIOD FROM: <u>9-11-14</u> TO: <u>9-30-14</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>310.00</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>550.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>860.00</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>169.55</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>1029.55</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>T-SHIRTS FOR PRINTING</u>	\$ <u>39.29</u>
<u>BUSINESS CARDS</u>	\$ <u>60.48</u>
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
Total of Expenditures (\$100 or less each payee)	\$ <u>99.77</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>929.78</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>1029.55</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>0</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>1029.55</u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u>0</u>
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ <u>0</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>0</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ <u>0</u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>169.55</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)	\$ <u>169.55</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ANGIE HEDBERG				2. REPORT COVERING THE PERIOD FROM: 9-11-14 TO: 9-30-14		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name ROBERT		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name GOODALL		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$200.00
City		State TN	Zip Code	<input type="checkbox"/> Runoff (Local Elections Only)		
Occupation BUILDER		Employer OWNER OF GOODALL HOMES		Date of Contribution 9-14-14		Aggregate This Election
First Name CARTER/ELIZABETH		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name VANN		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$200.00
City JACKSONVILLE		State FL	Zip Code	<input type="checkbox"/> Runoff (Local Elections Only)		
Occupation FRIEND		Employer RETIRED		Date of Contribution 9-16-14		Aggregate This Election
First Name MARIA		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name REYNOLDS		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$150.00
City ORIONS BEACH		State FL	Zip Code	<input type="checkbox"/> Runoff (Local Elections Only)		
Occupation FRIEND		Employer RETIRED		Date of Contribution 9-16-14		Aggregate This Election
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
City		State	Zip Code	<input type="checkbox"/> Runoff (Local Elections Only)		
Occupation		Employer		Date of Contribution		Aggregate This Election
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					\$550.00	

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ANGIE WEDBERG				2. REPORT COVERING THE PERIOD		
				FROM: 9-11-14	TO: 9-30-14	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (In-kind contributions totaling more than \$100 from any contributor during the period)						
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City				Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City				Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City				Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City				Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City				Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS						
(Carry forward to Item 3. of next page if additional pages of this form are used.)					0	
(If this is the last page of in-kind contributions, this amount must be shown in Item 22b. of summary.)						

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ANGIE WEDBERG		2. REPORT COVERING THE PERIOD		
		FROM 9-11-14	TO: 9-30-14	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 0	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name		Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name VISTA PRINT			CAR MAGNETS VISABILITY & PROMOTION	119.94
Address				
City	State	Zip Code		
First Name		Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name C & C SHIRT WORKS			PROMOTE CANDIDATE T-SHIRTS	139.84
Address				
City	State	Zip Code		
First Name		Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name CAPITOL PROMOTIONS			PROMOTE CANDIDATE YARD SIGNS	670.00
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 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		
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.)			929.78	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <div style="font-size: 1.5em; font-family: cursive; text-align: center;">ANGIE WEDBERG</div>				2. REPORT COVERING THE PERIOD FROM: 9.11.14 TO: 9.30.14					
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)									
Complete the Following for the Source of the Loan									
First Name ANGIE		Middle Name		Outstanding Loan Balance (Beginning of Period) 0	Loans Received 169.55	Loan Payments 0	Outstanding Loan Balance (End of Period) 169.55		
Last Name/Organization Name WEDBERG				Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Date of Loan 9.28.14			
Address 112 TRAIL RIDGE WAY				<input type="checkbox"/> Runoff (Local Elections Only)					
City MENDOTSONVILLE		State TN	Zip Code 37075						
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)									
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code			City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code			City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code			City		State	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
4. Totals for all Loans (complete on last page of itemized loans) <small>(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.)</small>				Outstanding Loan Balance (Beginning of Period) 0	Loans Received 169.55	Loan Payments 0	Outstanding Loan Balance (End of Period) 169.55		



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
ANGIE WEBBERG				FROM: 9-15-14		TO: 9-30-14	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name		0	169.55	0	169.55
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
ANGIE							
WEBBERG							
112 TRAIL RIDGE WAY							
MEMPHISVILLE	TN	37075					
LOAN TO PAY EXPENDITURES							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
City	State	Zip Code					
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
City	State	Zip Code					
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
City	State	Zip Code					
4. TOTALS							
(Total from Outstanding Balance - (End of Period) column must also be shown in Item 23b. on summary page.)				0	169.55	0	169.55