CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

| 1. DATE OF REPORT | 125 NAME OF CANE | NEATE 63 COLUMNITOR | | |
|--|--|--|---|--|
| 17/20/2 | 1 1 1 1 | DIDATE OR COMMITTEE | | |
| 1/28/22 | 1 UCDC1 | AN ITU | TON | |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE | 1 | | 3. ELECTION DAT | re/ |
| 1 D. b. o. b. A | もしてい | | | / |
| 1 KUCAA | 1(3/00 | | 18/4/ | 12Z |
| 4.a. CAMPAIGN ADDRESS AND PHONE | | | 7 / | |
| Street or Rural Route | City | St <u>a</u> te | Zip Code | Phone |
| 1 277 Junger (K | Callatin | (2) | 2 | |
| 200 101767 | CHALLECT IN | 170 | 21066 - | 615-479-7789 |
| 4.b. CANDIDATE'S HOME ADDRESS (if different | • | | | |
| Street or Rural Route | City | State | _Zip Code | Phone |
| LLL (Upper 1) r | Collator | Th) 3 | 37066 | 115-479-7784 |
| 5. OFFICE SOUGHT (include district number | | | | |
| 3. Of FIGE BOOOTT (include district nation) | , ii applicable) | . NAME OF POLITICAL | | oe candidate) |
| Cainty Commissioner L |), ch 4 8 | 1) obsak | ++1570N | |
| 7. CATEGORY OR REPORT (Check one) | 11/19 | 17.61171141 | 1 19/02 | |
| | | | Г-1 | |
| FIRST SECOND THIRD | FOURTH | PRE- PRF- | M/D-YEAR | L.J YEAR-END |
| QUARTER QUARTER QUARTE | | RIMARY GENERAL | SUPPLEMENTA | |
| 8.a. BEGINNING DATE OF REPORTING PERIOD | | b. ENDING DATE OF REPO | RTING PERIOD | L SOFT BEWENTAL |
| | | | | |
| | | | | |
| 9. (Check one) | | | | |
| | | | | |
| a. This campaign is exempt from deta | iled disclosure because o | ontributions (including in-kir | nd) received total \$1, | 000 or less AND expendi- |
| tures total \$1,000 or less for this re | porting period. (Complete | e items 12d., 12e. and 12f.) | • | |
| h This appropriate is required to file of | Intelled Successed discussion | | | |
| b. This campaign is required to file a campaign is required to | retailed linancial disclosur | e decause contributions (in | icluding in-kind) rece | ived total more than \$1,000 |
| | griproder sim for occurring | period. | | |
| and or expenditures total more than | | | | |
| and of experialitates total more than | | | | |
| <u> </u> | information contained in | this campaign financial die | placure report in true | and that this second is |
| 10. I/we do solemnly swear or affirm that the | information contained in tions and expenditures re | this campaign financial dis | closure report is true | and that this report is an |
| I/we do solemnly swear or affirm that the accurate accounting of campaign contribu | tions and expenditures re | quired to be reported by the | e candidate committe | e by the Campaign |
| I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w | tions and expenditures re e swear or affirm that no | equired to be reported by the campaign contributions hav | e candidate committe e been expended to | e by the Campaign |
| I/we do solemnly swear or affirm that the accurate accounting of campaign contribu | tions and expenditures re e swear or affirm that no | equired to be reported by the campaign contributions hav | e candidate committe re been expended to | e by the Campaign |
| I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w | tions and expenditures re e swear or affirm that no | equired to be reported by the campaign contributions hav | e candidate committe re been expended to | e by the Campaign |
| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w benefit of the candidate or for any other necessity. | tions and expenditures re e swear or affirm that no | equired to be reported by the campaign contributions hav | e candidate committe re been expended to | e by the Campaign |
| I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w | tions and expenditures re e swear or affirm that no | equired to be reported by the campaign contributions have ined by the federal internal | e candidate committe re been expended to | ee by the Campaign r the personal financial |
| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w benefit of the candidate or for any other necessity. | tions and expenditures re e swear or affirm that no | equired to be reported by the campaign contributions have ined by the federal internal | e candidate committe ve been expended fo revenue code. | e by the Campaign |
| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w benefit of the candidate or for any other not signature of candidate. | tions and expenditures re e swear or affirm that no | equired to be reported by the campaign contributions have ined by the federal internal | e candidate committe ve been expended fo revenue code. | ee by the Campaign r the personal financial |
| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w benefit of the candidate or for any other necessity. | tions and expenditures re e swear or affirm that no | equired to be reported by the campaign contributions have ined by the federal internal | e candidate committe ve been expended fo revenue code. | ee by the Campaign r the personal financial |
| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w benefit of the candidate or for any other not signature of candidate. | tions and expenditures rele swear or affirm that no compolitical purpose as def | equired to be reported by the campaign contributions have ined by the federal internal | e candidate committe ve been expended fo revenue code. | ee by the Campaign r the personal financial |
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| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribu Financial Disclosure Act. Additionally, I/w benefit of the candidate or for any other not signature of candidate 11. WITNESS SIGNATURE | tions and expenditures rele swear or affirm that no compolitical purpose as def | equired to be reported by the campaign contributions have ined by the federal internal signature of | e candidate committe /e been expended fo revenue code. f political treasurer | ee by the Campaign r the personal financial |
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| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribution in the candidate or for any other numbers of candidate or for any other numbers of candidate 11. WITNESS SIGNATURE signature of witness 12. SUMMARY | tions and expenditures rele swear or affirm that no compolitical purpose as defined by the second state. | equired to be reported by the campaign contributions have fined by the federal internal signature of signatur | e candidate committe /e been expended fo revenue code. f political treasurer ure of witness | date 21/28/2-2 date |
| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribution in the candidate or for any other numbers of candidate or for any other numbers of candidate 11. WITNESS SIGNATURE signature of witness 12. SUMMARY | tions and expenditures rele swear or affirm that no compolitical purpose as defined by the second state. | equired to be reported by the campaign contributions have fined by the federal internal signature of signatur | e candidate committe /e been expended fo revenue code. f political treasurer ure of witness | date 21/28/2-2 date |
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| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contributional Disclosure Act. Additionally, I/w benefit of the candidate or for any other not signature of candidate 11. WITNESS SIGNATURE signature of witness 12. SUMMARY a. BALANCE ON HAND LAST REPORT | tions and expenditures rele swear or affirm that no compolitical purpose as defined by the determinant of th | equired to be reported by the campaign contributions have ined by the federal internal signature of signature | e candidate committe //e been expended fo revenue code. If political treasurer ure of witness | date 21/28/2-2 date |
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| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribution of the candidate or for any other noting signature of candidate 11. WITNESS SIGNATURE Signature of witness 12. SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD | tions and expenditures rele swear or affirm that no compolitical purpose as defended by the date that the date tha | equired to be reported by the campaign contributions have ined by the federal internal signature of signature | e candidate committe //e been expended fo revenue code. If political treasurer ure of witness | date 21/28/2-2 date |
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| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contributional Disclosure Act. Additionally, I/w benefit of the candidate or for any other noting signature of candidate 11. WITNESS SIGNATURE 12. SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD | tions and expenditures rele swear or affirm that no compolitical purpose as defended by the date 7/28/22 date 7/28/33 date | equired to be reported by the campaign contributions have ined by the federal internal signature of signature of the campaign contributions have ined by the federal internal signature of the campaign and the ca | e candidate committee been expended for revenue code. If political treasurer ure of witness \$ 200 \$ 1860 | date |
| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contributional Disclosure Act. Additionally, I/w benefit of the candidate or for any other noting signature of candidate 11. WITNESS SIGNATURE 12. SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD | tions and expenditures rele swear or affirm that no compolitical purpose as defended by the date 7/28/22 date 7/28/33 date | equired to be reported by the campaign contributions have ined by the federal internal signature of signature of the campaign contributions have ined by the federal internal signature of the campaign and the ca | e candidate committee been expended for revenue code. If political treasurer ure of witness \$ 200 \$ 1860 | date |
| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contribution in the property of the candidate or for any other not signature of candidate 11. WITNESS SIGNATURE 12. SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD | tions and expenditures rele swear or affirm that no compolitical purpose as defined by the second of | equired to be reported by the campaign contributions have ined by the federal internal signature of signature of the campaign contributions have ined by the federal internal signature of the campaign and the ca | e candidate committee been expended for revenue code. If political treasurer ure of witness \$ 200 \$ 1860 | date |
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| 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contributional Disclosure Act. Additionally, I/w benefit of the candidate or for any other number of candidate. 11. WITNESS SIGNATURE Signature of witness 12. SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD | tions and expenditures rele swear or affirm that no compolitical purpose as defined by the second state. 7/28/22 date 7/28/22 date | equired to be reported by the campaign contributions have ined by the federal internal signature of signature of the campaign contributions have ined by the federal internal signature of the campaign and the ca | e candidate committee been expended for revenue code. If political treasurer ure of witness \$ 200 \$ 1860 | date |
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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| NAME OF CANDIDATE OR COMMITTEE | | | 2 REPORT COVERING THE PERIOD FROM 7/1/22 TO: 7/25/22 | | |
|---|-----------------------------------|---------------------------------------|--|----------------------------|--|
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT | Amount | | | | |
| | | | contributions totaling more than \$100 from any contribu | itor) | |
| 1 6 1 | Middle Name | | Contribution Received For: | Amount of Contribution | |
| Last Name/Organization Name | | | Primary Election General Election | | |
| 1 | | | En intery Election Endedicti | w | |
| Address 447 6/11/10/1 | | Runoff (Local Elections Only) | 1200 | | |
| City Callet | State | Zin Code 37066 | Date of Contribution | Aggregate This Election | |
| Address 447 Ellis WAY City Callatin State Tip Code Occupation To 30066 Employer | | | - | | |
| Lotired | | | | | |
| Employer | | | 7/1/22 | | |
| First Name | Middle Name | | Contribution Received For: | Amount of Contribution | |
| Last Name/Organization Name | Last Name/Organization Name | | Primary Election General Election | | |
| Address | | | Runoff (Local Elections Only) | | |
| City | State | Zip Code | Date of Contribution | Aggregate This Election | |
| Occupation | | | | | |
| | | . : | | | |
| Employer | | | | | |
| First Name | Middle Nam | e | Contribution Received For: | Amount of Contribution | |
| Last Name/Organization Name | | Primary Election General Election | | | |
| Address | | Runoff (Local Elections Only) | | | |
| City | State | Zip Code | Date of Contribution | Aggregate This Election | |
| Occupation | ation | | | | |
| Employer | | | | | |
| Chibicket | | | | } | |
| First Name | ⁄liddle Nam | e | Contribution Received For: | Amount of Contribution | |
| Last Name/Organization Name | | ☐ Primary Election ☐ General Election | | | |
| Address | | | Runoff (Local Elections Only) | | |
| City State Zip Code | | Date of Contribution | Aggregate This Election | | |
| Occupation | <u> </u> | <u> </u> | | - 195/ San Tillo Elloudoll | |
| Employer | | | | | |
| | | | | | |
| TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of (if this is the last page of contributions, this amount must be a second to the contribution of the contri | of this form ar se shown in it | e used.) lem 15b. of summary.) | | | |

SUMMARY PAGE - CANDIDATE

| 18. NAME OF CANDIDATE OR COMMITTEE (In Full) | 14. REPORT COVERING THE PERIOD | | | | |
|--|------------------------------------|--|--|--|--|
| 1 Romp His To | FROM: 7/1/22 TO: 7/25/22 | | | | |
| 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) | \$_ <u>200</u> | | | | |
| c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.). | \$ <u>260</u> ° | | | | |
| 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.) | \$ <u>200</u> | | | | |
| 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) | | | | |
| \$ | | | | | |
| \$ | | | | | |
| \$ | | | | | |
| | | | | | |
| 3 | | | | | |
| <u> </u> | | | | | |
| \$ | | | | | |
| \$ | | | | | |
| \$ | | | | | |
| \$ | <u> </u> | | | | |
| | · 6 | | | | |
| Total of Expenditures (\$100 or less each payee) | 11 L) | | | | |
| b. Itemized Expenditures (Over \$100 each payee this period) | \$ _/840 | | | | |
| c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) | \$ <u>/840 ' '</u> | | | | |
| 20. LOAN REPAYMENTS MADE THIS PERIOD | ·····\$ | | | | |
| 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) | \$ <u>1860 ('</u> | | | | |
| 22.IN-KIND CONTRIBUTIONS | v a | | | | |
| 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 iter | n 12.f.) | | | | |



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

| L NAME OF CANDIDATE OF COMMITTEE, | | | 2. REPORT COVER FROM // /2Z | TO: 7/30/22 | | | |
|---|--------------------------|------------------------|---------------------------------------|-----------------------|--|--|--|
| | Amount | | | | | | |
| 3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 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 | | <i>mailers</i> | | # 777 50 | | | |
| Address III STRACE Las | Address 711 Spence Lane | | #103940 Invoice | | | | |
| City Mashulle | State Zip Code 37217 | | | | | | |
| First Name | Middle Name | Purpose of Expenditure | | Amount of Expenditure | | | |
| Last Name/Business Name ASAP PYINTING | | Push courds | | *167.44 | | | |
| Address Ille Imperial | Blud | | | 101.71 | | | |
| Hendersonville | State Zip Code 37075 | | | | | | |
| First Name | Middle Name | Purpose of Expenditure | | Amount of Expenditure | | | |
| Last Name/Business Name DHI Corp | | -[| | | | | |
| Address 711 Spencer LANC | | 1 | | - 60 | | | |
| · Nashville | State Zip Code 3 7 8 7 5 | Mailers H | Z | 725 55 | | | |
| First Name | Middle Name | Purpose of Expenditure | | Amount of Expenditure | | | |
| Last Name/Business Name KWIK SAK # 6/2 | | | | | | | |
| Address | | | | 1,00 | | | |
| GALLATIN | State 7 2ip Code 3 664 | | | \$6000 | | | |
| First Name | Middle Name | | | Amount of Expenditure | | | |
| Last Name/Business Name A.K.O.N.i.K. 5hirts | | | | | | | |
| Address | | | | 60 | | | |
| City GALLATIN | TN 37066 | Shirts | _ | 130 | | | |
| First Name | Middle Name | Purpose of Expenditure | -× - - | Amount of Expenditure | | | |
| Last Name/Business Name | | | | | | | |
| Address | | | | | | | |
| City | State Zip Code | | | | | | |
| 5. TOTAL ITEMIZED EXPENDITURES | of this form pressed | | | 1860.49 | | | |
| (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.) | | | | 100000 | | | |