CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 2.a. NAME OF CANDIDATE OR COMMITTEE 10 30 22 2.a. NAME OF CANDIDATE OR COMMITTEE SUSSE							
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DAT	E			
4.a. CAMPAIGN ADDRESS AND PHONE			,0,				
Street or Rural Route 106 Villa Way He	ndersmy) le	State TN	Zip Code 37075	Phone 615 - 348 - 7838			
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	nt than 4.a.) City	State	Zip Code	Phone			
5. OFFICE SOUGHT (include district number, i	f applicable) 6. NAI	San -	REASURER (may b	e candidate)			
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH PRE- QUARTER PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b. END	ING DATE OF REPORT	RTING PERIOD	S S T T SELECT THAT T I T ME			
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. 							
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 expenditures required swear or affirm that no campain	to be reported by the gn contributions have the federal internal	e candidate committe e been expended for	e by the Campaign			
11. WITNESS SIGNATURE signature of witness	10-31-22 date	- A-/L-/A	ure of witness	10-31-22 date			
12. SUMMARY							
a. BALANCE ON HAND LAST REPORT			s 947,77	-			
b. TOTAL RECEIPTS THIS PERIOD			\$ 100.00	_			
c. TOTAL DISBURSEMENTS THIS PERIOD .	FILEO		\$ 775,21				
d. BALANCE ON HAND (12.a. plus 12.b. n	ninus 12.c.) AM	PM		\$ 272.56			
e. TOTAL LOANS OUTSTANDING	OCT	71177		-()-			
f. TOTAL OBLIGATIONS OUTSTANDING	SUMNER CO ELECTION COM	UNTY MISSION		\$			

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD					
Styrey Sasse	FROM: 10/1/22 TO: 16/29/22					
15. CONTRIBUTIONS (other than loans and interest)	•					
a. Unitemized Contributions (\$100 or less from each source this period)	\$/60.00					
b. Itemized Contributions (over \$100 from each source this period)	\$					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>/00.00</u>					
16. LOANS RECEIVED THIS REPORTING PERIOD	\$0-					
17. INTEREST RECEIVED THIS REPORTING PERIOD	s <u>-0 -</u>					
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 100,00					
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)						
\$						
\$						
\$						
\$	_					
\$						
Total of Expenditures (\$100 or less each payee)						
b. Itemized Expenditures (Over \$100 each payee this period)	.\$ 775.2					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 775.21					
20. LOAN REPAYMENTS MADE THIS PERIOD	s0-					
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)	.\$					
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

PTTV. 1 (ACC 0					RING THE PERIOD TO: 10/19/12		
Tollift.					Amount 0 -		
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	to any payee during the per	Amount of Expenditure		
Last Name/Business Name	st Name/Busingss Name						
13/3		Postage		465.44			
Address Imperial Blod					103.49		
Hendersonile	State Zip S	507075					
First Name	Middle Name		Purpose of Expenditure	V	Amount of Expenditure		
Last Name/Business Name W. Sign Man			Ward Sign	ıs	207.58		
Address Widtown Ct Ste 203				201.30			
Hendersonville	State , Zip C		L. P. L. L. H. Co.				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name		Administrati	V.				
Amann, Com		Cidens	,	102.19			
440 Tem Ave		Copenses					
Seath	State Zip C	8109					
First Name	Name Middle Name		Purpose of Expenditure	and the second	Amount of Expenditure		
Last Name/Business Name							
Address							
City	State Zip Ci	ode	a e				
	Y PAR			60 - 970 CON 11 CON 12			
First Name	Middle Name		Purpose or Expenditure		Amount of Expenditure		
Last Name/Business Name			s, et en				
Address							
Çity	State Zip Co	ode					
First Name	Middle Name		Purpose of Expenditure	not yet a	Amount of Expenditure		
Last Name/Business Name							
Address							
City	State Zip Co	ode	-				
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.)							