CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

2. NAME OF CANDIDATE 20	A DATE OF DEPORT	O NAME OF O	ANDIDATE OD C	ON AN AUTTEE		
2. IF COMMITTEE, NAME OF CANDIDATE 4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 1.00 Louding Trace N Hendersonville 4.b. CANDIDATES HOME ADDRESS (if different than 4.a.) Street or Rural Route 4.b. CANDIDATES HOME ADDRESS (if different than 4.a.) Street or Rural Route 5. OFFICE SOUGHT (include district number, if applicable) 6. NAME OF POLITICAL TREASURER (may be candidate) 1.00 LAND MARPH 7. CATEGORY OR REPORT (Check one) FIRST COUNTY FIRS	1. DATE OF REPORT			COMMITTEE		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 100 Walthon Trace Management Mana		John C.	135611		2 ELECTION DAT	rr
Street or Rural Route City State Zip Code Phone 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route 5. OFFICE SOUGHT (include district number, if applicable) County Cartegory Report (Check one) County Cartegory Report (Check one) PRST SECOND THRD FOURTH PRST SECOND THRD FRST FRST MIDYEAR YEAR-END QUARTER PRSM YEAR-END QUARTER PRSM FRST MIDYEAR YEAR-END QUARTER PRSM YEAR-END QUARTER FRST MIDYEAR YEAR-END QUARTER FRST MIDYEAR YEAR-END QUARTER YEAR-END QUARTER FRST MIDYEAR YEAR-END QUARTER FRST FRST MIDYEAR YEAR-END QUARTER FRST FRST MIDYEAR YEAR-END QUARTER FRST MIDYEAR YEAR-END QUARTER FRST MIDYEAR YEAR-END QUARTER FRST MIDYEAR YEAR-END QUARTER FRST FRST MIDYEAR YEAR-END QUARTER FRST MIDYEAR	2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DAT	E
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Siret or Rural Route 5. OFFICE SOUGHT (included district number, if applicable) County Mayor 7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD FOURTH PRAMEY SEMERAL SUPPLEMENTAL SUPPLEMENTAL 8.a. BEGINNING DATE OF REPORTING PENIOD 7 12 2011 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.) 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, tive 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. 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, tive 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. 10. I/We do solemnly 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. 11. If IT		City		State	Zip Code	Phone
Street or Rural Route Stre	100 Walton Trace N H	endersonvil	10	TH	37075	615.788.0865
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD FOURTH FRE FRE MIDYEAR YEAREND QUARTER QUARTER QUARTER QUARTER QUARTER PRIMARY GENERAL SUPPLEMENTAL S.B. BEGINNING DATE OF REPORTING PERIOD S. B. ENDING DATE OF REPORTING PERIOD 1/26 Zozz 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 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. Summary	4.b. CANDIDATE'S HOME ADDRESS (if different	than 4.a.)		State	Zip Code	Phone
7. CATEGORY OR REPORT (Check one) FIRST SECOND THRD FOURTH PRE- PRE- MILYEAR YEAR-END QUARTER QUARTER QUARTER QUARTER QUARTER PRIMARY GENERAL SUPPLEMENTAL SUPPLEMENTAL 8.a. BEGINNING DATE OF REPORTING PERIOD 8.b. ENDING DATE OF REPORTING PERIOD 7 26 702 7 70 7 7 7 7 7 7 7	5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME C	OF POLITICAL T	REASURER (may b	pe candidate)
FIRST SECOND THIRD FOURTH PRE PRE MID-YEAR YEAR-END QUARTER QUARTER QUARTER PRE SUPPLEMENTAL SUPPL			Leonar	d A Davi	3	¥
9. (Check one) a.	FIRST SECOND THIRD QUARTER QUARTER QUARTER		PRIMARY	GENERAL	SUPPLEMENTA	
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 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, live 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. 10 III 10 10 10 10 10 10 1					RTINGPERIOD	
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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. 1011/2022 3ignature of candidate 11. VITNESS SIGNATURE 12. SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PERIOD d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) FILED PM PM S _ 70 - 10	tures total \$1,000 or less for this report	ting period. (Comp	lete items 12d.	, 12e. and 12f.)		
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. 10 11 Zozz Signature of political treasurer 10 10 10 10 10 10 10 1						
signature of candidate date signature of political treasurer date 11. WITNESS SIGNATURE 10	accurate accounting of campaign contributio Financial Disclosure Act. Additionally, I/we s	ns and expenditures	s required to be no campaign co	e reported by the ontributions have	candidate committe been expended fo	ee by the Campaign
signature of candidate date signature of political treasurer date 11. WITNESS SIGNATURE 10	100	101		100	. () -	100 20
11. VITNESS SIGNATURE 12. SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PERIOD d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) e. TOTALLOANS OUTSTANDING AM PM S _ 70 - OCT 11 2022 -6 -	aignoture of condidate	10)11 Co 2		signature of	political transurer	
Signature of witness 10/1/2 Sumulucius 10-4-22 12. SUMMARY a. BALANCE ON HAND LAST REPORT \$ 23,137.23 b. TOTAL RECEIPTS THIS PERIOD \$ 3,025.00 c. TOTAL DISBURSEMENTS THIS PERIOD \$ 11,112.94 d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	signature of candidate	date		signature or	political treasurer	date
a. BALANCE ON HAND LAST REPORT	See ann Bristol	10/11/2	~ (Jewn signatu	All Cup upe of witness	10-9-22 date
b. TOTAL RECEIPTS THIS PERIOD	12. SUMMARY					
c. TOTAL DISBURSEMENTS THIS PERIOD	a. BALANCE ON HAND LAST REPORT				\$ 23,137.23	_
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	b. TOTAL RECEIPTS THIS PERIOD				\$ 3,025.00	
e. TOTAL LOANS OUTSTANDING STORY STO	c. TOTAL DISBURSEMENTS THIS PERIOD				\$ 11,112.96	_
e. TOTAL LOANS OUTSTANDING \$\$ OCT 11 2022	d. BALANCE ON HAND (12.a. plus 12.b. m	inus 12.c.)	En	***************************************		\$ 15049.27
	e. TOTAL LOANS OUTSTANDING		100			.\$0-
	f. TOTAL OBLIGATIONS OUTSTANDING	OCT	1 2022			. \$

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	_		/ERING THE PERIOD		
John C. Isbell for County Mayor	•	FRO	M: 7/26/22	TO: 9/30/2012	
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)					
a. Unitemized Contributions (\$100 or less from each source this p	eriod)	\$_	103s.∞	_	
b. Itemized Contributions (over \$100 from each source this period				_	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add	15.a. and 15.b.).			\$ 30ZS. 00	
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 ite	em 12.b.)			\$ 3025.00	
DISBURSEMENTS					
19. EXPENDITURES (other than loan payments)					
a. Expenditures (\$100 or less each payee this period) (must be liste	ed by category -	e.g., pr	inting, postage	, gasoline)	
Manketing	\$ 38.9	1			
Chambea Events	\$ 123.00	>			
Voten Files	\$ 75.00				
Donahan	\$ 100.0	0_			
Food	\$ 50.99	<u> </u>			
	\$				
	\$				
	\$				
-	\$			朝	
			3030.		
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					
20. LOAN REPAYMENTS MADE THIS PERIOD				\$ <u>5750.∞</u>	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown i	n item 12.c.)			\$ 11,112.96	
22.IN-KIND CONTRIBUTIONS					
a. Unitemized in-kind contributions (\$100 or less from each source	this period)	\$_	-0-		
b. Itemized in-kind contributions (over \$100 from each source this p	period)	\$_	-0-		
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (a	add 22.a. and 22	(.d.		\$0-	
23. OBLIGATIONS					
a. Unitemized Obligations Outstanding (\$100 or less each)		\$_	-0-		
b. Itemized Obligations Outstanding (Over \$100 each)		\$_	.0.	_	
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (mi	ust be shown i ite	em 12.	f.)	\$_``O-	



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTE	E		2	REPORT COVERI		
Joh	n C. 15	bell for Co	inty Mayor	TO: 9/30/2022		
1			1.61		Amount	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT					-6 -	
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEMIZ	ZED CONTRIBUTION (contributions totaling more than \$	100 from any contributor		
First Name	Middle Nam	e	Contribution Received For:		Amount of Contribution	
B24an Last Name/Organization Name			Primary Election	General Election		
Bondurant			E i initial y Electricii	2 Contrar Election		
			Runoff (Local Election	s Only)	250.00	
Address 1054 N. Sugartree LA)					
City Gallaha	State	Zip Code 37065	Date of Contribution		Aggregate This Election	
Occupation	1.	3 7002	1			
Owner		Ø.	7/25/20	22	250,00	
Chipiojoi .			1		2,0,00	
Critter Clinic			What is a second of the second		A Maria da A	
First Name	Middle Nam	ne	Contribution Received F	or:	Amount of Contribution	
Randall			Primary Election	General Flection		
Last Name/Organization Name Stamps			La Fillinary Election	D General Liection	250.00	
Address			Runoff (Local Election	is Only)		
105 Red Maple Ct	,					
City Hendersonville	State	Zip Code 3707 S	Date of Contribution		Aggregate This Election	
Occupation	1 1	1 3 10 (3.	i			
Retired			7/30/202	Z50,00		
Retired		APPLICATION OF THE PARTY OF THE				
First Name	Middle Name	e	Contribution Received Fo	or:	Amount of Contribution	
First Name	Middle Nam	e		50	Amount of Contribution	
First Name Last Name/Organization Name				or: General Election		
First Name Last Name/Organization Name Deposit Adjus				General Election	Amount of Contribution	
First Name Last Name/Organization Name			☐ Primary Election ☐	General Election	1490.00	
First Name Last Name/Organization Name Deposit Adjus			Primary Election	General Election		
First Name Last Name/Organization Name Deposit Adjust Address City	hment		☐ Primary Election ☐	General Election	1490.00	
First Name Last Name/Organization Name Deposit Adjust Address	hment		☐ Primary Election []	General Election	1490.00 Aggregate This Election	
First Name Last Name/Organization Name Deposit Adjust Address City	hment		☐ Primary Election []	General Election	1490.00	
First Name Last Name/Organization Name Deposit Adjus Address City Occupation	hment		☐ Primary Election []	General Election	1490.00 Aggregate This Election	
First Name Last Name/Organization Name Deposit Adjusted Address City Occupation Employer	hment	Zip Code	☐ Primary Election []	General Election s Only)	1490.00 Aggregate This Election	
First Name Last Name/Organization Name Deposit Adjusted Address City Occupation Employer First Name	tment State	Zip Code	Primary Election	General Election as Only)	Aggregate This Election	
First Name Last Name/Organization Name Deposit Adjus: Address City Occupation Employer	tment State	Zip Code	Primary Election	General Election s Only)	Aggregate This Election	
First Name Last Name/Organization Name Deposit Adjus Address City Occupation Employer First Name Last Name/Organization Name	tment State	Zip Code	Primary Election	General Election s Only) General Election	Aggregate This Election	
First Name Last Name/Organization Name Deposit Adjusted Address City Occupation Employer First Name	tment State	Zip Code	☐ Primary Election ☐ ☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election s Only) General Election	Aggregate This Election 1490.03 Amount of Contribution	
First Name Last Name/Organization Name Deposit Adjus Address City Occupation Employer First Name Last Name/Organization Name	tment State	Zip Code	Primary Election	General Election s Only) General Election	Aggregate This Election	
First Name Last Name/Organization Name Deposit Adjus Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Name	Zip Code	☐ Primary Election ☐ ☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election s Only) General Election	Aggregate This Election 1490.03 Amount of Contribution	
First Name Last Name/Organization Name Deposet Adjus: Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Name	Zip Code	☐ Primary Election ☐ ☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election s Only) General Election	Aggregate This Election 1490.03 Amount of Contribution	
First Name Last Name/Organization Name Deposit Adjus Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Name	Zip Code	☐ Primary Election ☐ ☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election s Only) General Election	Aggregate This Election 1490.03 Amount of Contribution	
First Name Last Name/Organization Name Deposit Adjus Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Name	Zip Code	☐ Primary Election ☐ ☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election s Only) General Election	Aggregate This Election 1490.03 Amount of Contribution	
First Name Last Name/Organization Name Deposit Adjus Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Name	Zip Code	☐ Primary Election ☐ ☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election s Only) General Election	Aggregate This Election 1490.03 Amount of Contribution	
First Name Last Name/Organization Name Deposit Adjusted	State State	Zip Code Zip Code	☐ Primary Election ☐ ☐ Runoff (Local Election ☐ Date of Contribution ☐ Contribution Received For: ☐ Primary Election ☐ ☐ Runoff (Local Election	General Election s Only) General Election	Aggregate This Election 1490.03 Amount of Contribution	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	RING THE PERIOD								
	TO: 9/30/2022								
3. TOTAL ITEMIZED CAMPAIGN EXPENDITE	Amount								
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)									
First Name	First Name Middle Name Purpose of Expenditure								
Last Name/Business Name			-						
Ron Blanton for Judge]		560.00				
Address 137 William Shy Rd			Donation		20.00				
City	State	Zip Code							
Hendersonville	Ta	37075	PERSONAL PROPERTY.		CONTRACTOR DE LOS DESCRIPTORS				
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name			1						
Rotary			Members	D	275.00				
P.O. 473			Membership	Dues					
Hendersonville	State	Zip Code							
First Name	Middle Nar	REPORTED AND ASSESSMENT AND	Purpose of Expenditure		Amount of Europalitus				
p. 1 vals at the formation protection	Middle Nar	ne	_ Purpose of Experialitie		Amount of Expenditure				
Last Name/Business Name Trail blazer									
Address			Database		2,400.00				
S82 Lincoln Dr	State	Zip Code	1						
Edina	MN	53436							
First Name Kenny	Middle Nam	е	Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name Buacl	I								
Address			Reunbursen	ent	400.00				
City 10 Vandywood Ct	State	Zip Code	-	-					
Hendersonville	Ta	37075			•				
First Name	Middle Nam		Purpose of Expenditure		Amount of Expenditure				
				9	7 mount of Exponential				
Last Name/Business Name Living Sent Ministrie	. 5								
Address Zos Indian Lake Blud			Donation		60.00				
City	State	Zip Code							
Herdersonville	TN	37015							
First Name	Middle Nam	Э	Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name Trail blazer	and the second s								
Address 583 Lincoln De			Database	600.00					
Edina	State	Zip Code							
5. TOTAL ITEMIZED EXPENDITURES									
(Carry forward to item 3, of next page if additional pages (If this is the last page of expenditures, this amount must					4,775.00				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER FROM:	ERING THE PERIOD			
John	TO:							
		Amount						
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU				4.775.00				
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEM	ZED EXPENDITURE (6	expenditures totaling more than \$100	to any payee during the per	riod)			
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name	-		1					
V F W Address			7					
77R New Shackie Isl	and R	d	Donation	200.00				
Hendersonville	State	Zip Code 37075						
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address			-					
City	State	Zip Code						
First Name	Middle Nar	l ne	Purpose of Expenditure		Amount of Expenditure			
Lock Name (Duning and Name			- aspect of Exponditure		Amount of Expericitare			
Last Name/Business Name								
Address				a				
City	State	Zip Code						
First Name	е	Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name								
Address								
City	Zip Code							
		Will have the service of the service						
First Name	Middle Nam	е	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
First Name	Middle Nam	9	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must	of this form a be shown in i	re used.) tem 19b. of summary.)			4975.00			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR (COMMITTEE	4717					117	2.	REPORT	COV	/ERINC	G THE PERIOD	
John C. Ispe	11 for C		110.0	. N):	
John C. 15 De 3. COMPLETE THE APPROPRI	ATE ITEMS	FOR EACH	ITEMIZ	ED LOAN	(loans totaling r	nore than	\$100 from ar	y sourc	e during the	period)		9/30/22	
Complete the Following for the Source					459.4 (1 - 55 - 15)	Man Sal	STERROLL PE	All District	N. F. T. Service	N COOL	OPAN		
First Name	Middle Nar	ne		Outstanding	Loan Balance								
John Last Name/Organization Name	n C				(Beginning of Period) Loans Received			Loan Payments			Outstanding Loan Balance (End of Period)		
<u>Isball</u>				575	50 °°	- (0 -	5	750"			٥.	
Address				Loan Recei					Date of Lo	oan			
City Hendersonville	State Zip Code					Primary Election General Election Runoff (Local Elections Only)							
		sers or Guar	antors fo	or Above Loa	an (If more spa	ce is nee	eded please	attach	a page)				
First Name		Middle Nam			First Name	1,1000		e testin	STREET, SOLL	Mid	ldle Nam	В	
Last Name/Organization Name					Last Name/Org	anization	Name						
Address					Address								
City		State	Zip Co	de	City					Stat	e	Zip Code	
Amount Guaranteed Outstanding					Amount Guaran	teed Outs	tanding						
First Name	Septimizes -			- Programa				No.		NO.	All/allocation	C. F. SHWANDANAN	
That Name		Middle Name)		First Name Middle Name							3	
Last Name/Organization Name					Last Name/Orga	anization N	Name				-		
Address					Address		1111						
City		State	Zip Cod	е	City					State	:	Zip Code	
Amount Guaranteed Outstanding	1		1		Amount Guarante	eed Outst	anding				-		
First Name	· · · · · · · · · · · · · · · · · · ·	Middle Name	War Man			(- () - () - ()	10 W/La 20 W L W/L			Web W-	W. C. C. C.		
		Middle Name			First Name					Midd	lle Name		
Last Name/Organization Name					Last Name/Orgar	nization N	ame						
Address					Address								
City	1	State	Zip Code		City			_		State		Zip Code	
Amount Guaranteed Outstanding			<u> </u>		Amount Guarante	ed Outsta	ndina						
							9						
First Name	N	Middle Name			First Name Middle Name								
ast Name/Organization Name				L	ast Name/Organi	ization Na	ime		1				
Address				A	Address								
City	S	tate	Zip Code		City					State		Zip Code	
mount Guaranteed Outstanding					mount Guerontee	d Out-t	dian						
- Wilding H				r	mount Guarantee	u Outstan	iuing						
Totals for all Loans (complete on las	t page of iter	nized loans	5)		outstanding Loan (Ralance	l con-			wath Saluta	C .		
(Total loans received should also be shown in i (Total loan payments should also be shown in i Total outstanding loan balance should also be s	tem 16. on sum	mary page.)	(6)	F	(Beginning of Pe	eriod)	Loans Receive	ed	Loan Paymen			nding Loan Balance and of Period)	
OC 4433 (D. 4433)	nown in item 12.	e. on front pag	e.)		575000		-0.		5750	20		7-	