## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

# For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT  4/8/22  2.a. NAME OF CANDIDATE OR COMMITTEE  1. DILLON LAMBERTH									
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE								
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route  570 Aprin Br Rd Collontonn	State Zip Code Phone 7N 37048								
CANDIDATE'S HOME ADDRESS (if different than 4.a.)     Street or Rural Route     City	State Zip Code Phone								
Country Commens x5.m - District 4	ME OF POLITICAL TREASURER (may be candidate)  Thompson								
7. CATEGORY OR REPORT (Check one)  FRST SECOND THIRD FOURTH PRE- QUARTER QUARTER QUARTER QUARTER PRIMARY  8.a. BEGINNING DATE OF REPORTING PERIOD  8.b. ENDI	PRE- MID-YEAR YEAR-END GENERAL SUPPLEMENTAL SUPPLEMENTAL DING DATE OF REPORTING PERIOD								
1/16/22	3/31/22								
<ul> <li>9. (Check one)</li> <li>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.)</li> <li>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.</li> </ul>									
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.									
WITNESS SIGNATURE  WITNESS SIGNATURE  118122  signature of witness  date	Whish Manman 4-8-22 signature of witness date								
12. SUMMARY	7150 -								
BALANCE ON HAND LAST REPORT  b. TOTAL RECEIPTS THIS PERIOD	S - 1000								
b. TOTAL RECEIPTS THIS PERIOD	. <u>1585.87</u>								
c. TOTAL DISBURSEMENTS THIS PERIOD									
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)									
e. TOTAL LOANS OUTSTANDINGAM									
f. TOTAL OBLIGATIONS OUTSTANDING APR 0 8 2022 \$									
SUMNER COUNTY									

## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
DECEMBERTH LAMBERTH	FROM: 4/6/22 TO: 3/31/22
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	1.1.15
a. Unitemized Contributions (\$100 or less from each source this period)	s 1544
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>2594</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$
17. INTEREST RECEIVED THIS REPORTING PERIOD	ss
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	<u>2579</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)
Fortand Chamber - Membership & 30-	
Summer Co - Voter Data s 75	<del>-</del>
\$	
\$	
\$	
\$	
\$	
\$	
	1105-
Total of Expenditures (\$100 or less each payee)	_
b. Itemized Expenditures (Over \$100 each payee this period)	12 %
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	•
20. LOAN REPAYMENTS MADE THIS PERIOD	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	s 1383.07
22.IN-KIND CONTRIBUTIONS	
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	.)\$ <u>N/A</u>
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	n 12.f.)s

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Page \_\_\_\_\_ of \_\_\_\_

#### **ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

NAME OF CANDIDATE OR COMMITTEE		_		2. REPORT COVER	
DILLON LAN	FR91/6/22	TO: 3/31/22			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FRO	OM PRECEDING PAC	GE (enter \$0 if first itemized p	age)	Amount 1000
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH (TEMIZ	ED CONTRIBUTION (	contributions totaling more than §	100 from any contributor	·)
First Name Wazne					Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	500-
Address 532 Aplin Br R	1		Runoff (Local Election		
City Cottonton	State	Zip Code 37048	Date of Contribution	Aggregate This Election	
Occupation Carrier		•	1/24/22		5m-
Employer VSPS			10/11		700
First Name Jim	Middle Nam	ne	Contribution Received For	:	Amount of Contribution
Last Name/Organization Name				General Election	300-
Address PO Box 7	<b>+</b>		Runoff (Local Election	ns Only)	
City Portland	State 77	Zip Code 37148	Date of Contribution		Aggregate This Election
Occupation			3/10/22	2007	
Employer SUF			719/62		700
First Name Board	Middle Nam	е	Contribution Received For:	Amount of Contribution	
Cast Name/Organization Name			Primary Election	General Election	200
Address Po Pax			Runoff (Local Election	200	
City Portland	State	Zip Code 37/48	Date of Contribution	Aggregate This Election	
Occupation Owner		, , , ,	3/2-	2===	
Employer Portland Build	les	<del>-</del> · · · · · · · · · · · · · · · · · · ·	1/30		200
First Name					Amount of Contribution
Last Name/Organization Name		Primary Election	General Election		
Address			Runoff (Local Election	ns Only)	
City	Zip Code	Date of Contribution	Aggregate This Election		
Occupation			1		
Employer					
TOTAL ITEMIZED CONTRIBUTIONS     (Carry forward to item 3. of next page if additional pages     (If this is the last page of contributions, this amount must				1000-	

## **ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE**

NAME OF CANDIDATE OR	COMMITTEE				2. REPORT COVE		
		<u>-</u>			FROM:	TO:	
3. TOTAL ITEMIZED IN-KIND				· · · · · ·	<del>`</del>	Amount	
4. COMPLETE THE APPROPRIAT	TE ITEMS FOR EAC	H ITEMIZED IN	N-KIND CONTRIBU	JTION (in-kind contributions totaling	more than \$100 from any co	entributor during the period)	
First Name	1	Middle Name			In-Kind Contribution Received For:  Primary Election General Election		
Last Name/Organization Name				Runoff (Local Election			
Address			,	Date of In-Kind Contribution		Aggregate this Election	
City	;	State Zip	Code	Description of In-Kind Contribution			
Occupation	Employer		4.11				
First Name		Middle Name	71/1/1	In-Kind Contribution Receive	d For: General Election	Value of In-Kind Contribution	
Last Name/Organization Name			$H \cup V$	Runoff (Local Election			
Address	\			Date of In-Kind Contribution		Aggregate this Election	
City		State Zip	Code	Description of In-Kind Contribution			
Occupation	Employer						
First Name		Middle Name		In-Kind Contribution Receive	d For:  General Election	Value of In-Kind Contribution	
Last Name/Organization Name	<u> </u>		11 /	Runoff (Local Election	_		
Address		7		Date of In-Kind Contribution		Aggregate this Election	
City		State Zip	Code	Description of In-Kind Contribution	•		
Occupation	Employer						
First Name		Middle Name		In-Kind Contribution Receive		Value of In-Kind Contribution	
Last Name/Organization Name				☐ Primary Election ☐ ☐ Runoff (Local Election	General Election		
Address				Date of In-Kind Contribution	,,	Aggregate this Election	
City		State Zip	Code	Description of In-Kind Contribution			
Occupation	Employer						
First Name	A	Middle Name		In-Kind Contribution Receive	ed For:  General Election	Value of In-Kind Contribution	
Last Name/Organization Name				Runoff (Local Election	<del></del>		
Address				Date of In-Kind Contribution		Aggregate this Election	
City	S	State Zip C	Code	Description of In-Kind Contribution		1	
Occupation	Employer	L	·				
5. TOTAL ITEMIZED IN-KIND		_			<u></u>		
(Carry forward to item 3. of next pag (If this is the last page of in-kind con				k.)			
SS-1128 (Rev. 2/06)			_	Pag	e of	RDA 1159	

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

DILLON LAMBERTH   FROM/le/22   To 3/s/Jrz	1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVE	
3. **COTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first termized page)  4. COMPACTE THE APPROPRIATE ITEM'S FOR EACH ITEMIZED EXPENDITURE (enter-course trading race has \$100 any page during fire percent.)  First Name    Purpose of Expenditure   Pu	VILLON LAW	BER7	H		FROM // U/22	10:3/31/22
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (preproduces unlarge more may state to any paper exemy the period.)	3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	URES ERO	OM PRECEDING PA	GE (enter \$0 if first itemized n	ane)	
Froi Name    Froi Name   Purpose of Expenditure   Purpose of Expenditur			• • • • • • • • • • • • • • • • • • • •			<u> </u>
Last NameBusiness Agence City Port Isolate State   Purpose of Expenditure    First Name   Middle Name    First Name    First Name   Middle Name    First Name   Middle Name    First Name    First Name   Middle Name    First Name   Middle Name    First Name    First Name   Middle Name    First Name    Address    City   State   Zip Code    First Name    Amount of Expenditure    Amount of Expenditure    Amount of Expenditure    Amount of Expenditure    First Name    Amount of Expenditure    First Name    Amount of Expenditure    First Name    F						Ţ
State Zip Code  Prist Name  Middle Name  Middle Name  Purpose of Expenditure  Varid Signs  482.90  Amount of Expenditure  Varid Signs  Amount of Expenditure  Varid Signs  Var	<b>一</b>				4	Amount or expenditure
State Zip Code  Prist Name  Middle Name  Middle Name  Purpose of Expenditure  Varid Signs  482.90  Amount of Expenditure  Varid Signs  Amount of Expenditure  Varid Signs  Var	Last Name/Business Name			Pich Card	ls/	1126-
State Zip Code  Prist Name  Middle Name  Middle Name  Purpose of Expenditure  Varid Signs  482.90  Amount of Expenditure  Varid Signs  Amount of Expenditure  Varid Signs  Var	Andrees				/	737
State Zip Code  Prist Name  Middle Name  Middle Name  Purpose of Expenditure  Varid Signs  482.90  Amount of Expenditure  Varid Signs  Amount of Expenditure  Varid Signs  Var				_ Yard 5.51	us	
Last Name/Business Name Part Last Name/Business Name Address City State Zip Code  Purpose of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure	City Portland	State	Zip Code	· ·		
Address City Port land State Zip Code  First Name Last NameBusiness Name City State Zip Code  First Name Middle Name Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  First Name Middle Name  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Last NameBusiness Name  Address  City State Zip Code  Purpose of Expenditure  Amount of Expenditure  First Name  Last NameBusiness Name  Address  City State Zip Code	First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure
Address City Port land State Zip Code  First Name Last NameBusiness Name City State Zip Code  First Name Middle Name Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  First Name Middle Name  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Last NameBusiness Name  Address  City State Zip Code  Purpose of Expenditure  Amount of Expenditure  First Name  Last NameBusiness Name  Address  City State Zip Code	Last Name/Rusinges Name					
First Name Last Name Business Name Last Name Business Name Address City State Zip Code  Purpose of Expenditure  House of Expenditure  Amount of Expenditure  House of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  First Name Address City State Zip Code  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Last NameBusiness Name  Address City State Zip Code  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Address City State Zip Code	Grophic Ob:	5455,0	ns	Vard 5:5	us	111111
First Name Last NameBusiness Name Last NameBusiness Name Address City State Viga Code  Purpose of Expenditure  House of Expenditure  House of Expenditure  House of Expenditure  House of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  First Name  Address City State Zip Code  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Address City State Zip Code  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure	Address			10-10-10		482,90
Last Name@usiness Name City  State  Zip Code  Purpose of Expenditure  Amount of Expenditure  First Name Last Name@usiness Name Address  City  State  Zip Code  Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Last Name@usiness Name  Address  City  State  Zip Code  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Address  City  State  Zip Code  Purpose of Expenditure  Amount of Expenditure  Expenditure  Amount of Expenditure  Amount of Expenditure	City Portland	State	Zip Code			
City State Zip Code  First Name Middle Name Purpose of Expenditure  Address  City State Zip Code  First Name Middle Name Purpose of Expenditure  Address  City State Zip Code  First Name Middle Name Purpose of Expenditure  First Name State Zip Code  First Name Middle Name Purpose of Expenditure  First Name State Zip Code  First Name Middle Name Address  City State Zip Code  First Name State Zip Code	First Name	Middle Na	sme	Purpose of Expenditure		Amount of Expenditure
City State Zip Code  First Name Middle Name Purpose of Expenditure  Address  City State Zip Code  First Name Middle Name Purpose of Expenditure  Address  City State Zip Code  First Name Middle Name Purpose of Expenditure  First Name State Zip Code  First Name Middle Name Purpose of Expenditure  First Name State Zip Code  First Name Middle Name Address  City State Zip Code  First Name State Zip Code	Last Name/Business Name	1				
City State Zip Code  First Name Middle Name Purpose of Expenditure Amount of Expenditure  Address  City State Zip Code  First Name Middle Name Purpose of Expenditure  Last Name/Business Name  Address  City State Zip Code  First Name Middle Name Purpose of Expenditure  Address  City State Zip Code  First Name Middle Name Purpose of Expenditure  Address  City State Zip Code  First Name Middle Name Purpose of Expenditure  Address  City State Zip Code  First Name Middle Name Purpose of Expenditure  Address  City State Zip Code	TOX TYPETE			1/2/00		498.57
First Name Last Name/Business Name  Address  City  State  Middle Name  Middle Name  Last Name/Business Name  Address  City  State  Zip Code  Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  First Name  Last Name/Business Name  Address  City  State  Zip Code	Address	dddress				
Last Name/Business Name  Address  City  State  Middle Name  Address  City  State  State  Zip Code  Purpose of Expenditure  Address  City  First Name  Middle Name  Address  City  State  Zip Code  Purpose of Expenditure  Purpose of Expenditure  Address  City  Address  State  Zip Code  Purpose of Expenditure  Address  City  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  State Zip Code	City	State	Zip Code			
Last Name/Business Name  Address  City  State  Middle Name  Address  City  State  State  Zip Code  Purpose of Expenditure  Address  City  First Name  Middle Name  Address  City  State  Zip Code  Purpose of Expenditure  Purpose of Expenditure  Address  City  Address  State  Zip Code  Purpose of Expenditure  Address  City  Amount of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  Amount of Expenditure  State Zip Code				<u>, , , , , , , , , , , , , , , , , , , </u>	<b>-</b>	
Address  City State Zip Code  First Name Middle Name Last Name/Business Name  City State Zip Code  First Name Purpose of Expenditure  First Name Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  Purpose of Expenditure  First Name Address  City State Zip Code  Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  First Name Purpose of Expenditure  Amount of Expenditure  Amount of Expenditure  Expenditure  Amount of Expenditure  First Name Susiness Name  Address  City State Zip Code	First Name	rst Name Middle Name				Amount of Expenditure
City State Zip Code  First Name Middle Name Last Name/Business Name  Address  City State Zip Code  First Name Middle Name  Address  City State Zip Code  First Name Middle Name Last Name/Business Name  Address  City State Zip Code  Amount of Expenditure  Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  State Zip Code	Last Name/Business Name					
First Name  Last Name/Business Name  Address  City  State  Middle Name  Middle Name  Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  Purpose of Expenditure  Amount of Expenditure  Purpose of Expenditure  First Name  Purpose of Expenditure  Purpose of Expenditure  Amount of Expenditure  Active State Zip Code	Address			7		
Last Name/Business Name  Address  City  State  Zip Code  First Name  Middle Name  Purpose of Expenditure  Address  City  State  Total ITEMIZED EXPENDITURES	City	State	Zip Code	_		
Last Name/Business Name  Address  City  State  Zip Code  First Name  Middle Name  Purpose of Expenditure  Address  City  State  Total ITEMIZED EXPENDITURES						
Address  City  State  Zip Code  First Name  Middle Name  Last Name/Business Name  Address  City  State  Zip Code  Purpose of Expenditure  Amount of Expenditure  City  State  Zip Code	First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure
City State Zip Code  First Name Middle Name  Last Name/Business Name  Address  City State Zip Code  Total ITEMIZED EXPENDITURES	Last Name/Business Name	1				
First Name Middle Name Purpose of Expenditure  Last Name/Business Name  Address  City State Zip Code  Furpose of Expenditure  Amount of Expenditure	Address			$\dashv$		
First Name Middle Name Purpose of Expenditure  Last Name/Business Name  Address  City State Zip Code  Furpose of Expenditure  Amount of Expenditure	City	Cinta	Zio Codo	_		
Last Name/Business Name  Address  City State Zip Code	Cny	State	Zip Code			
Address  City State Zip Code  5 TOTAL ITEMIZED EXPENDITURES	First Name	Middle Nar	Tie	Purpose of Expenditure		Amount of Expenditure
City State Zip Ccde	Last Name/Business Name	1				
5 TOTAL ITEMIZED EXPENDITURES	Address					
5. TOTAL ITEMIZED EXPENDITURES  (Carry forward to item 3. of next page if additional pages of this form are used.)	City	State	Zip Ccde			
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)	(Carry forward to item 3, of next page if additional page					1420.87

#### **ITEMIZED STATEMENT OF LOANS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PE						
							F	ROM:		TO:	
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	·	Middle Name			Outstanding Loan Balance Loans (Beginning of Period) Received			Loan Payments		Outstanding Loan Balance (End of Period)	
Last Name/Organization Name											
Address					oan Received For: Date of Loan						
City	State	Zip Code	Zip Code		ary Election General Election  If (Local Elections Only)						
	List All Endor	sers or Guar	antors fo	or Above Loa	n (If more spa	ice is neede	ed please atta	ch a page)		,	
First Name		Middle Nami			First Name		•		Middle	Name	
Last Name/Organization Name		· [			Last Name/Or	ganization Na	ime		•		
Address		\ \	1		Address						
City		State	Z	pde /	City				State	Zip Code	
Amount Guaranteed Outstanding				V	Amount Guaranteed Outstanding						
First Name Middle Name			X	First Name Middle Name							
Last Name/Organization Name				Last Name/Organization Name							
Address			Ź	Address							
City	City State Zip Co		ode	City				State	Zip Code		
Amount Guaranteed Outstanding					Amount Guara	nteed Outstar	nding				
First Name		Middle Name	9		First Name				Middl	e Name	
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City		State	Zip Co	ode	City State Zip Code						
Amount Guaranteed Outstanding			<u></u>	Amount Guaranteed Outstanding							
First Name Middle Name				First Name Middle Name					Name		
Last Name/Organization Name				Last Name/Organization Name							
Address				Address							
City		State	Zip Co	ode	City			Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding							
4. Totals for all Loans (complete on last page of itemized loans) (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.)				Outstanding Lo (Beginning o		Loans Received	Loa Payrr		Outstanding Loan Balance End of Period)		



RDA 1159

## **ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
		FROM:	TO:			
COMPLETE THE APPROPRIATE ITEMS F     OBLIGATION (obligations totaling more that     person/vendor at the end of the reporting p	n \$100 ow		Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Na	nme				
Last Name/Business Name	1					
Address			_			
City	State	Zip Code				
Description of Obligation	1			<u> </u>	<u> </u>	<u> </u>
First Name	Middle Na	ime				
Last Name/Business Name	1	[1	<b> </b>			
Address			∜ /			
City	State	Zip Code	1\			
Description of Obligation	1		1 ×		•	
First Name	Middle	me \	1			
Last Name/Business Name	*					
Address		V	<b>\\</b>			
City	State	Pip Code				
Description of Obligation		•				
First Name	Middle Na	me				
Last Name/Business Name	I		-			
Address			1			
City	State	Zip Code	1			
Description of Obligation						I
First Name	Middle Na	me				
Last Name/Business Name	1				-	
Address						
City	State	Zip Code	1			
Description of Obligation	<u> </u>					l
4. TOTALS						
(Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)	column mus	st also be shown				