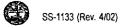
# **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

### For State and Local Candidates **For Single-Candidate Committees**

1. DATE OF REPORT	I	ANDIDATE OR COMMI		
2.b. IF COMMITTEE, NAME OF CANDIDATE	1 704 36	nny" Weat	3. ELECTIO	N DATE
4.a. CAMPAIGN ADDRESS AND PHONE		<u></u>	<u> </u>	St -022
Street or Rural Route	City	Stat	e Zip Code	Phone
1654 B Highway 2315 B	ethpase	TN	37022	615-841-4024
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	nt than 4.a. <del>]</del> City	Stat	e Zip Code	Phone
5. OFFICE SOUGHT (include district number, Sher: ff	if applicable)	6. NAME OF PO Chery 1	LITICAL TREASURER	(may be candidate)
7. CATEGORY OR REPORT (Check one)				
FIRST SECOND THIRD	L_J FOURTH	∐ i PRE- i	l <b>i∠</b> PRE- MID-Y	EAR YEAR-END
QUARTER QUARTER QUARTER  8.a. BEGINNING DATE OF REPORTING PERIOD	R QUARTER T		NERAL SUPPLEM OF REPORTING PERIOD	MENTAL SUPPLEMENTAL
1-16-2021			of reporting periol D - 20 2 /	J
9. (Check one)	·-·	Q-5	3-2021	
2 This campaign is exampt from details	ad disalagura bagaya	a castributions (include	dimental lateral and a second and a	. (c.) #1 000 1 000 11
<ul> <li>a.  This campaign is exempt from details tures total \$1,000 or less for this report</li> </ul>	orting period. (Comp	lete items 12d., 12e.	and 12f.)	otal \$1,000 or less AND expendi-
b. This campaign is required to file a de	etailed financial disclo	sure because contrib	utions (including in-kind	d) received total more than \$1,000
and/or expenditures total more than	\$1,000 for this report	ing period.	anona (maranig in time	
10. I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other not signature of candidate.	ions and expenditures swear or affirm that	s required to be repor no campaign contribu defined by the federa	ted by the candidate co	ommittee by the Campaign ided for the personal financial
11. WITNESS SIGNATURE				
Robot Collinsignature of witness	7-9-202 date	1 Role	signature of witness	7.9.2011 date
12. SUMMARY				<b>M</b> . <b>A</b>
a. BALANCE ON HAND LAST REPORT		······································	s <u>15, 20</u>	7.7.
b. TOTAL RECEIPTS THIS PERIOD	***************************************	******************************	sO	
c. TOTAL DISBURSEMENTS THIS PERIOD			s <u>1,42</u>	89.
d. BALANCE ON HAND (12.a. plus 12.b. ı	minus 12.c.)	PM		\$ 13,778, XY
e. TOTAL LOANS OUTSTANDING				
f, TOTAL OBLIGATIONS OUTSTANDING	SUM ELECTR	NER COUNTY		s <u> </u>

## **SUMMARY PAGE - CANDIDATE**

13 NAME OF CANDIDATE OR COMMITTEE (In Full)			14. REPORT COVERING THE PERIC			
Koy "Sonny" Weatherfold		FROM:	16/21 T	0:6/30/2/		
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)			•	. ,		
a. Unitemized Contributions (\$100 or less from each source this pe	eriod)	\$	<u> </u>			
b. Itemized Contributions (over \$100 from each source this period)		\$	0			
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 16	5.a. and 15.b.)		\$	0		
16. LOANS RECEIVED THIS REPORTING PERIOD	***************************************		\$			
17. INTEREST RECEIVED THIS REPORTING PERIOD	***************************************		\$	0		
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in iter	n 12.b.)		\$	0		
DISBURSEMENTS						
19. EXPENDITURES (other than loan payments)						
a. Expenditures (\$100 or less each payee this period) (must be listed	l by category - e	e.g., printing,	postage, ga	soline)		
Portland Chamber of Commerce Dues	\$ 90	<u> </u>				
Shackle Island Fire Dept. Donation	\$ <u>/oo</u> .					
Galletin Rotary Club Ducs	\$ _/00.	<u> </u>				
Harlan Checks. offer	\$ <u>39</u>	24				
	\$					
	\$					
-	\$					
	\$					
	\$ \$					
	<u> </u>		2.6			
Total of Expenditures (\$100 or less each payee)						
b. Itemized Expenditures (Over \$100 each payee this period)			•	. 26		
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.)						
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)						
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

1 NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVERING THE					
Koy "Songe" Weatherford FROM: 1/16/2					TO:6/3-/2/
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 Ex		Purpose of Expenditure	· · · · ·	Amount of Expenditure
Last Name/Business Name  Summer Food Bank  Address		Donation		120 =	
1021 Woods Ferry Pd. City  Calletia	State	Zip Code 37066		,	
First Name	Middle Nam		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	<u> </u>	<del></del>			
Galletin Lions Clab			Duce	<del>-</del>	170.
P.O. Box 912					/ / .
City	State	Zip Code	1		
Galletin	7~	37066			
First Name	Middle Nan	nė .	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Henderson ville Kotary Club		Dues		175.	
550 B. Main 5+.					
Hendersonville	State	Zip Code <b>♂ 7</b> ○73 <sup>—</sup>			
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		Dues		60	
Gallatin Chamber of Commerce				222.	
118 W. Main St.					
City	State	Zip Code			
Gallatin	IN	37066			
First Name	Middle Nam	ne e	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Henderson ville Rotany Club		Dues		224.	
S50 & Main St.					
Henderson ville	State	Zip Code 37075			
First Name	Middle Nam		Purpose of Expenditure	•	Amount of Expenditure
Gallatin Quarterback Chib		Donation 11		115 =	
1501 E. Main St.				//3 .	
Callatin	State	Zip Code 37066			
5. TOTAL ITEMIZED EXPENDITURES					1 0/
(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.)					1026.

### ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Roy "Song" Weatherford				2. REPORT COVER FROM: 1/16/2/	NG THE PERIOD TO: 6/30/2/
1 ' ' '					Amount
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.)					1026,-
	<del>,</del>			to any payee during the pen	
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name U. S. Post Office				1211 00	
Address Maple St. Since Tip Code		P.o. Boy	у. 	134. –	
City // L	State Zip Code		<b>−</b>	en Tay	
[52][B)	TN	37066			
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	1		7		
Address					
City	State	Zip Code	7		:
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	<u> </u>				
			_		
Address					
City	State	Zip Code	†		
First Name Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		1			
Address			•		
City	State	Zip Code			
					1
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		1			
Address		1			
City	State	Zip Code			
5. TOTAL ITEMIZED EXPENDITURES					90
(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.)				1160.00	