CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

		d Local Candida ndidate Commit		JUN 30 2020 9
DATE OF REPORT		CANDIDATE OR COMMITTEE		
6-30-20	Frie	• , ,	Erry All	WILSON COUNTY TION COMMISSION
2.b. IF COMMITTEE, NAME OF CANDIDATE	1 1		3. ELECTION DATE	<u> </u>
lerry A	tshe		2018	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	State	Zip Code	Phone 615
P.O. Bu 2131 1	Lebanon		37088-2131	547-7880
4.b. CANDIDATE'S HOME ADDRESS (if differen Street or Rural Route	it than 4.a.)			
1284 Hallawas Ri	Lebar	State 701 'TW	Zip Code	Phone 615
5. OFFICE SOUGHT (include district number, if			37090 L TREASURER (may be	547-785
1 1	omm.	lerr		carididate)
7. CATEGORY OR REPORT (Check one)		1017	9713110	
FIRST SECOND THIRD	L_ FOURTH	PRE- PRE-	MID A YEAR	YEAR-END
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY GENERAL 8.b. ENDING DATE OF REF	SUPPLEMENTAL	SUPPLEMENTAL
1-15-20		し、36-91		
9. (Check one)			<u> </u>	
 a. This campaign is exempt from detailed tures total \$1,000 or less for this report b. This campaign is required to file a detained and/or expenditures total more than \$1 	rung period. (Comp ailed financial disclo	lete items 12d., 12e. and 12	f.)	
10. I/we do solemnly swear or affirm that the infraccurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we signature of candidate or for any other nonposition of the candidate. Signature of candidate	ns and expenditures wear or affirm that r	required to be reported by the campaign contributions had defined by the federal internal	the candidate committee	L AL
11. WITNESS SIGNATURE		/ . (
HUTO DOMUNO Signature of witness	6/30/200	r flotory	gum	6/38/2000
12. SUMMARY	· uaye	signa	ature of witness	[*] date
a. BALANCE ON HAND LAST REPORT			., 21,736.3	0
b. TOTAL RECEIPTS THIS PERIOD			\$	
c. TOTAL DISBURSEMENTS THIS PERIOD			.s <u>50.00</u>)
d. BALANCE ON HAND (12.a. plus 12.b. min	nus 12.c.)		\$ <u>.</u>	21,686.30
e. TOTAL LOANS OUTSTANDING			\$ <u>_</u>	0
f. TOTAL OBLIGATIONS OUTSTANDING			\$-	0

JUN 30 2020

SUMMARY PAGE - CANDIDATE

WILSON COUNTY

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REP	ORT COVE	OMMI ERING	ISSION G THE PERIO
Triends of lerry Ashe	FROM:/_	15-20	TO:	6-30-20
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)				
a. Unitemized Contributions (\$100 or less from each source this period)	\$	0		
b. Itemized Contributions (over \$100 from each source this period)				
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		******************	- .\$	\circ
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.)				
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, g	asolir	ne)
Gidens Bibles \$ 50.		. 0,0		,
\$				
				
				
 \$				
\$				
				
\$				
				
Total of Expenditures (\$100 or less each payee)		A		
b. Itemized Expenditures (Over \$100 each payee this period)				
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)				0
20. LOAN REPAYMENTS MADE THIS PERIOD				9
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		\$		<u>a</u>
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.)	\$	(<u>ා</u>

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Frends	o-t	Terry	Ashe	REPORT COVER	TO: 6-30-20	
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT				<u> </u>	Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITE	MIZED EXPENDITURE (expenditures totaling more than \$100	to any payee during the peri	od)	
First Name	Middle N	ame	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		Donntin		50,		
Address Lebanon Camp City Lebanon TN 37087				5 0 7		
City Lebanon	State	Zip Code 37087	-			
First Name	Middle Na	0.7 10.7 10.7 10.7 10.7 10.7 10.7 10.7 1	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address		-				
City	State	Zip Code				
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	_ <u>l</u>					
Address						
City	State	Zip Code				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		·				
Address						
City	State	Zip Code				
First Name	Middle Nan	не	Purpose of Expenditure		Amount of Expenditure	
ast Name/Business Name	<u> </u>					
Address		·				
City	State	Zip Code			i	
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure	
ast Name/Business Name	L					
ddress	" " " " " " " " " " " " " " " " " " " 					
Sity	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 mus						