## CAMPAIGN FINANCIAL DISCLOSURE STATEMENT/ED 10:3

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

JAN 182022

	0						
1. DATE OF REPORT	2.a. NAME OF CANDIDATE C	RCOMMITTEE	1	WILSON COUNTY			
1-12-22	Friends	of Terr		ECTION COMMISSION			
2.b. IF COMMITTEE, NAME OF CANDIDATE			5. ELECTION DATE				
Terry Ash	e		2018				
4.a. CAMPAIGN ADDRESS AND PHONE				615			
Street or Rural Route	City	State	Zip Code	Phone			
14% 00% 01301	anon.	TN	37088-213	547.7880			
4.b. CANDIDATE'S HOME ADDRESS (if differen Street or Rural Route /	t than 4.a.)	State	Zip Code	Phone			
1284 Hollowan Rd.	Lebanon	TN	37096				
5. OFFICE SOUGHT (include district number, in	fapplicable) 6. NAM	E OF POLITICAL	TREASURER (may be ca	andidate)			
DIST 12 Country	Comm.	Terry	Ashe-				
7. CATEGORY OR REPORT (Check one)				74			
FIRST SECOND THIRD	FOURTH PRE-	L_J PRE-	L_J MID-YEAR	YEARIEND			
QUARTER QUARTER QUARTER	QUARTER PRIMARY	GENERAL	SUPPLEMENTAL	SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b. ENDI	NG DATE OF REPO					
7-1-21		1-15	22				
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 det	ailed financial disclosure becaus	se contributions (i	ncluding in-kind) received	total more than \$1,000			
and/or expenditures total more than \$	1,000 for this reporting period.			The state of the s			
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 of for any other non-signature of candidate.	ons and expenditures required to swear or affirm that no campaig	be reported by the contributions had the federal internations.	he candidate committee by tive been expended for the	y the Cam <u>p</u> aign			
11. WITNESS SIGNATURE							
Jame Wright signature of witness	1-12-22 date	-VIA IIV	i Wright ature of witness	1-12-22 date			
12. SUMMARY							
a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD			\$ <u>21,261.</u> 3	0			
b. TOTAL RECEIPTS THIS PERIOD			\$				
c. TOTAL DISBURSEMENTS THIS PERIOD			\$ 1,884 00				
C. TOTAL DISCONDENSION IN C. L. CONT.	. 40		•	19.377.30			
d. BALANCE ON HAND (12.a. plus 12.b. m	linus 12.c.)	***************************************	Φ=				
e. TOTAL LOANS OUTSTANDING			\$ "	0			
				0			
f. TOTAL OBLIGATIONS OUTSTANDING			\$ =				



# RECEIVED KM JAN 18 2022 63

#### SUMMARY PAGE - CANDIDATE

	WII SOME COLLETT					
13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD FROM: 7-/-					
RECEIPTS  RECEIPTS	19 21 113-22					
15. CONTRIBUTIONS (other than loans and interest)						
a. Unitemized Contributions (\$100 or less from each source this period)\$						
b. Itemized Contributions (over \$100 from each source this period)\$						
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)\$						
6. 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.						
Kott Hasting \$ 100°						
Robert Bryan \$ 1000						
Gladeville Community Center \$ 10000						
CLark Boyd \$ 500						
Gilen, Bibles \$ 50	06					
U.S. Post Office \$ 134						
\$						
\$						
\$						
	- 1004 00					
Total of Expenditures (\$100 or less each payee)	\$ 1,884					
b. Itemized Expenditures (Over \$100 each payee this period)	\$					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 1,884					
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)	\$					
. Itemized Obligations Outstanding (Over \$100 each)\$						
and a tions out of an old 22 a and 22 b) (must be shown i iter						

### ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

322						
1. NAME OF CANDIDATE OR COMMITTEE	eron Ashe	the state of the s	2. REPORT COVER!	NG THE PERIOD TO: /-/5-22		
	Amount					
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	- T	Amount of Expenditure		
Last Name/Business Name	1		•			
Last Name/Business Name Juliet City Half		Donota Fund sa	~`.	10000		
Address		Fund 1a	132	100		
City My Six left	State Zip Code					
First Name Robert	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	Danston	500	1000			
Address		(Sheri	44)	7000		
City Lebamor	State Zip Code 37087					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	Donation	<b>ふ</b>	10000			
Address Gladeville Qd.	,	- 1				
Gladeville	State Zip Code					
First Name Lock	Middle Name	Purpose of Expenditure	1	Amount of Expenditure		
Last Name/Business Name		Donati Cotate Hi	ion o	50000		
Address		(State H	ouse)			
City Lebanon	State Zip Code 37087					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Bibles		Donatio	WS	5000		
Address P.O. Box 591						
City Lebanon	State Zip Code 37087					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name (Business Name  On ted State Post Office  Address Gay St		Campaign Box	Mail 213/	134 00		
City Lebanon	State 70 Zip Code 3 7087					
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 are used.) be shown in item 19b. of summary.)					