## CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

RECEIVED

|   |   |   |   |                          | . CONTINETA                      |
|---|---|---|---|--------------------------|----------------------------------|
| 1. DATE OF REPORT   | 2.a. NAME OF C                                  |   |   | 1 4 5                    | 1 55 65 55 60                    |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE  | PH  | ILIP                                    | CRAIGH                                    | EAD                      | JUL 12 2017 '8                   |
|   |   |   |   | 3. ELECTION DAT          | WILSON COUNTY<br>TION COMMISSION |
| 4.a. CAMPAIGN ADDRESS AND PHONE<br>Street or Rural Route  | ***·  |   |   |                          |                                  |
| 413 OIL SPRINGS RD  | City<br>LEISAN                                  | <b>^/</b> \                             | State                                     | Zip Code                 | Phone                            |
| 4.b. CANDIDATE'S HOME ADDRESS (if different   |   | <i>3</i> O                              | TN  | 37087                    | <u>615-444-2119</u>              |
| Street or Rural Route   | City  |   | State                                     | Zip Code                 | Phone                            |
| 5. OFFICE SOUGHT (include district number, if   | applicable)                                     | 6. NAME                                 | OF POLITICAL                              | TREASURER (may b         | e candidate)                     |
| MAYOR   |   |   | ROYCE                                     | A BELCH                  | ER CPA                           |
| 7. CATEGORY OR REPORT (Check one)  FIRST SECOND THIRD  QUARTER QUARTER QUARTER  | FOURTH QUARTER                                  | PRE-                                    | PRE-<br>GENERAL                           | MID-YEAR<br>SUPPLEMENTAL | YEAR-END                         |
| 8.a. BEGINNING DATE OF REPORTING PERIOD   |   |   | GDATE OF REPO                             | RTING PERIOD             | SUFFECMENTAL                     |
| 1-16-17   |   |   | 4.30                                      | -17                      |                                  |
| 9. (Che <sup>, t</sup> one)   |   |   |   |                          |                                  |
| <ul> <li>a This campaign is exempt from detailed</li> <li>hures total \$1,000 or less for this report</li> </ul>  | disclosure because<br>ing period. (Compl        | e contribution<br>ete items 12d         | s (including in-kir<br>J., 12e. and 12f.) | nd) received total \$1,0 | 000 or less AND expendi-         |
| b. This campaign is required to file a deta and/or expenditures total more than \$1   | iled financial disclos<br>,000 for this reporti | sure because<br>ng period.              | contributions (in                         | cluding in-kind) receiv  | ved total more than \$1,000      |
| I/we do solemnly swear or affirm that the info<br>accurate accounting of campaign contribution<br>Financial Disclosure Act. Additionally, I/we sw<br>benefit of the candidate on for any other flooped. | s and expenditures<br>vear or affirm that n     | required to b                           | e reported by the                         | e candidate committee    | hutha Compains                   |
| This harden!  | 7/5/17  |   | 2 ~                                       | El.h.                    | 7/5/7                            |
| Agnature of candidate   | date  |   | signature of                              | political treasurer      | date                             |
| 11. WITNESS SIGNATURE   |   | <del>4   </del>                         |   |                          |                                  |
| Don't Collin  | 7/2/10  |   | 1.  |                          | 7/5/17                           |
| signature of vulness  | date  | _                                       | 1) and                                    | ire of witness           |                                  |
|   |   |   | Signatu                                   | re of withess            | date                             |
| 12. SUMMARY   |   |   |   |                          |                                  |
| a. BALANCE ON HAND LAST REPORT  |   |   |   | <u>5238.98</u>           | 3                                |
| b. TOTAL RECEIPTS THIS PERIOD   |   | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |   | <u>Ø</u>                 |                                  |
| c. TOTAL DISBURSEMENTS THIS PERIOD  | ***************************************         | *************************************** |   | 5,238,98                 |                                  |
| d. BALANCE ON HAND (12.a. plus 12.b. minu   | as 12.c.)                                       |   |   | \$                       | <u>8</u> 200                     |
| e. TOTAL LOANS OUTSTANDING  |   | •••••••••••                             |   | \$                       | 2,761; °2 WA                     |
| f. TOTAL OBLIGATIONS OUTSTANDING  |   |   |   | \$                       | Ø                                |



## SUMMARY PAGE - CANDIDATE

| 13. NAME OF CANDIDATE OR COMMITTEE (In Full) PHICIP CRAIGHEAN                          | 14. REPORT COVERING THE PERIOD        |
|--|---------------------------------------|
| RECEIPTS CRAIGHEAD   | FROM: 1/16/17 TO: 6/30/17             |
| 15. CONTRIBUTIONS (other than loans and interest)                                      | RECEIVED                              |
| a. Unitemized Contributions (\$100 or less from each source this period)               | \$                                    |
| b. Itemized Contributions (over \$100 from each source this period)                    | sJUL 12 2017                          |
| c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.).           | WILSON COUNTY  \$ ELECTION COMMISSION |
| 16. LOANS RECEIVED THIS REPORTING PERIOD   | <b>s</b>                              |
| 17. INTEREST RECEIVED THIS REPORTING PERIOD  | \$                                    |
| 18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)             | s Ø                                   |
| 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)     |
| <u> </u>   |                                       |
| <b>\$</b>  |                                       |
| \$   |                                       |
| \$   |                                       |
| <b></b> \$   |                                       |
| <u> </u>   |                                       |
| \$   |                                       |
| \$   |                                       |
| \$   |                                       |
|  |                                       |
| 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. and 19.b.)                | \$                                    |
| 20. LOAN REPAYMENTS MADE THIS PERIOD   | \$ <u>5,238.98</u>                    |
| 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)              | \$ <u>5,238, <sup>98</sup></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.)              | ss                                    |
| 23. OBLIGATIONS  |                                       |
| a. Unitemized Obligations Outstanding (\$100 or less each)                             | \$                                    |
| b. Itemized Obligations Outstanding (Over \$100 each)                                  | į.                                    |
| c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 1         | (12.f.)                               |

## ITEMIZED STATEMENT OF LOANS - CANDIDATE

| 1. NAME OF CANDIDATE OR C  | OMMITTEE                                | -           |                |   |  |                        |                                       | To                         | DED\D.  | r                                      | ERING THE PERIOD |  |
|--|---|-------------|----------------|---|--|------------------------|---------------------------------------|----------------------------|---|--|------------------|--|
| [ 4-   |   |             |                |   |  |                        | ROM: ,                                | 6/i                        | TO:   |  |                  |  |
| 3. COMPLETE THE APPROPRIA  |   |             |                | ZED LOAN  | (loans totaling n  | nore than S            | 100 from a                            | ny sourc                   | e during the  | penod)                                 | 11 8/30/1        |  |
| Complete the Following for the Source  | e of the Loan                           |             |                |   |  | anto gaptam entre au a | e new and a second action of          | Taraba an Sa a Sa a Sa a S |   | and ordered and a second               |                  |  |
| First Name PHIUP   | Middle Na                               | Middle Name |                |   | Outstanding Loan Balance Loans (Beginning of Period) Received    |                        |                                       | 4                          | Loan Outstanding Loan Baland Payments (End of Period) |  |                  |  |
| Last Name/Organization Name  CRAIGHEA  | Last Name/Organization Name CRAIGHEAD   |             |                | 8,000 ° Ø   |  |                        |                                       | 5,                         | 5,238,98 2,761.02                                     |  |                  |  |
| Address LIB OU. CPOING C. D.A.   |   |             | 1              | Received For: Date of Loan  |  |                        |                                       |                            |   |  |                  |  |
| City LEBANON   | State                                   | Zip Code    | <u></u><br>027 | ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only) |  |                        |                                       |                            |   |  | RECEIVED         |  |
|  | List All Endo                           | rsers or Gu | arantors fo    | or Above Loa  | Loan (If more space is needed please attach a page)  SUL 12 2017 |                        |                                       |                            |   |  |                  |  |
| First Name   |   | Middle Na   |                |   | First Name   | *                      | *****                                 |                            | , , , , , ,   | Mide                                   | WHOSON COUNTY    |  |
| Last Name/Organization Name  |   |             |                |   | Last Name/Organization Name                                      |                        |                                       |                            |   |  |                  |  |
| Address  |   |             |                |   | Address  |                        |                                       |                            |   |  |                  |  |
| City   |   | State       | Zip Co         | de 🔀  | City   |                        |                                       |                            |   | State                                  | Zip Code         |  |
| Amount Guaranteed Outstanding  |   |             |                | 20  | Amount Guarant   | eed Outst              | anding                                |                            |   | ــــــــــــــــــــــــــــــــــــــ |                  |  |
| First Name   | t Name Middle Name                      |             |                |   | First Name Middle Name   |                        |                                       |                            |   |  |                  |  |
| Last Name/Organization Name  |   |             |                |   | Last Name/Organization Name                                      |                        |                                       |                            |   |  |                  |  |
| Address  |   |             |                | 7 // 1  | Address  |                        |                                       |                            |   | <del>-</del>                           | 7                |  |
| City   |   | State       | Zip Cod        | ie  | City   |                        |                                       | ^                          |   | State                                  | Zip Code         |  |
| Amount Guaranteed Outstanding  |   | <u> </u>    | <del></del>    |   | Amount Guarante  | ed Outsta              | nding                                 | /                          |   | 1                                      |                  |  |
| First Name   |   | Middle Nam  | ne             |   | First Name   |                        | · · · · · · · · · · · · · · · · · · · |                            |   | Midd                                   | le Name          |  |
| Last Name/Organization Name  |   |             |                | Last Name/Organization Name   |  |                        |                                       |                            |   |  |                  |  |
| Address  | *************************************** | ***         |                |   | Address  | •                      |                                       |                            |   |  |                  |  |
| City   |   | State       | Zip Code       | е   | City   |                        |                                       |                            |   | State                                  | Zip Code         |  |
| Amount Guaranteed Outstanding  | <del> </del>                            |             |                |   | Amount Guarantee   | ed Outstar             | iding                                 | <del></del>                |   | L                                      |                  |  |
| First Name   |   | Middle Nam  | e<br>Paritare  |   | First Name   |                        |                                       |                            | 10.000  | Middle                                 | Name             |  |
| Last Name/Organization Name  |   |             | ĺ              | Last Name/Organization Name   |  |                        |                                       |                            |   |  |                  |  |
| Address  |   |             |                | <del> </del> /  | Address  |                        | ·                                     | ·                          |   |  |                  |  |
| City   |   | State       | Zip Code       |   | City   | ····                   |                                       |                            |   | State                                  | Zip Code         |  |
| Amount Guaranteed Outstanding  |   |             | 1              |   | mount Guarantee  | d Outstand             | ding                                  | •••                        | <u> </u>  |  | I                |  |
| . <b>Totals for all Loans (complete on last page of itemized loans)</b> (Total loans received should also be shown in item 16. on summary page.)           |   |             |                |   |  |                        |                                       | Loan                       |   |  |                  |  |
| (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.) |   |             |                | ļ   |  | 20                     | Ø                                     | ~                          | Paymer <b>5</b> ,238,                                 |  | (End of Period)  |  |