# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT For State and Local Candidates OCT 1 2 2020

ror Single-	Candidate (	Commit	ees	Art + c co-
1. DATE OF REPORT   2.a. NAME	OF CANDIDATE OR	COMMITTEE		- 13 COZO -
10/11/20 0	MH WAG	LKER	FOR MA	WILSORCOINTY
2.b. IF COMMITTEE, NAME OF CANDIDATE	, <u>, , , , , , , , , , , , , , , , , , </u>		3. ELECTION DATE	CTION COMMISSION
DAN WALKE	<u>ER</u>		2020	)
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City		State		**************************************
2013 WOODEREST CIR, MT JU	WAIFT	1-h)	Zip Code	Phone  F.7 class
4.b. CANDIDATE'S HOME ADDRESS (if different than 4 a.)		<u> </u>	37/22 (61	<i>5) 557-829.</i>
Street or Rural Route City		State	Zip Code	Phone
H.H	· · · · · · · · · · · · · · · · · · ·			
5. OFFICE SOUGHT (include district number, if applicable)			TREASURER (may be ca	andidate)
7. CATEGORY OR REPORT (Check one)	<u> </u>	ANK	Busit	
	П			-
FIRST SECOND THIRD FOURTH QUARTER QUARTER QUARTER		PRE-	MID-YEAR	YEAR-END
8.a. BEGINNING DATE OF REPORTING PERIOD		GENERAL DATE OF REPO	SUPPLEMENTAL ORTING PERIOD	SUPPLEMENTAL
7-29.30		9-30		
9. (Check one)				
a. This campaign is exempt from detailed disclosure betures total \$1,000 or less for this reporting point.	erause contributions (	/including in-ki	and announced total \$4 000.	
tures total \$1,000 or less for this reporting period. (C	Complete items 12d.,	12e. and 12f.)	na) received total \$1,000 ( )	or less AND expendi-
b. X This campaign is required to file a detailed financial of	disclosure because c	ontributions (ir	relation in kind) received	tatal mare then \$4 000
b. This campaign is required to file a detailed financial d and/or expenditures total more than \$1,000 for this re	eporting period.	Onthiocharia (	identification received	total more than \$ 1,000
10. I/we do solemnly swear or affirm that the information conta accurate accounting of campaign contributions and expendi Financial Disclosure Act. Additionally, I/we swear or affirm to benefit of the candidate or for any other nonpolitical purpose signature of candidate  10/11/202	that no campaign con e as defined by the fi	reported by the niributions have etieral internal	e candidate committee by	
11. WITNESS SIGNATURE  Signature of witness  late	JUW ==	<u>Jon</u> signati	ure of witness	<u> </u>
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT			s	
b. TOTAL RECEIPTS THIS PERIOD	(1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	 	s 16,790,00	
c. TOTAL DISBURSEMENTS THIS PERIOD	***************************************		14,371,80	İ
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)				418,20
e. TOTALLOANS OUTSTANDING				0,000
f. TOTAL OBLIGATIONS OUTSTANDING		******	\$ —	Ø



## SUMMARY PAGE - CANDIDATE

JOHNNAR PAGE - CANI	" T = T = T = WILSON COUNTY
13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PER
RECEIPTS	FROM: 1/29/20 TO: 9/30/2
15. CONTRIBUTIONS (other than loans and interest)	
a. Uniternized Contributions (\$100 or less from each source this period)	s 219000
b. Itemized Contributions (over \$100 from each source this period)	s 4600.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.t	67900
16. LOANS RECEIVED THIS REPORTING PERIOD	5 10 and 1
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ 10,000 a
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	* 14.79£ \$
DISBURSEMENTS	\$ 10,0
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category	- 8.0 printing post-
ANVERTISING \$ 30,0	
communications \$ 136	
DESIGN \$ 21	<del> </del>
MILEAGE \$ 18.	<del></del>
105 MGE \$ 44	<del></del>
RING-1116	
SUPPLIES	
F000 \$ 269	
\$ <u>157</u>	<u>, 16</u> 3
\$	***************************************
Total of Expenditures (\$100 or less each payee)	\$ 702.67
Itemized Expenditures (Over \$100 each payee this period)	\$ 13,669.13
TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	e 14371 90
LOAN REPAYMENTS MADE THIS PERIOD	5 0
TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	• 14371 80
IN-KIND CONTRIBUTIONS	1 131110
Uniternized in-kind contributions (\$100 or less from each source this period)	s 6
Itemized in-kind contributions (over \$100 from each source this period)	s 6
TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.	6
OBLIGATIONS	, — ¥
Unitemized Obligations Outstanding (\$100 or less each)	s 6
Itemized Obligations Outstanding (Over \$100 each)	s
TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	• • • • • • • • • • • • • • • • • • • •

OUT 10 2020

# ITEMIZED STATEMENT OF CONTRIBUTIONS OF CANDIDANT

1. NAME OF CANDIDATE OR COMMITTE			ELEC	TION COMMISSION
UAH WALKE	R FOR MAYO	クア	2. REPORT COV FROM: 7/29/2	ERING THE PERIOD
3. TOTAL ITEMIZED CAMPAIGN CONTRIB			1 2 1/2	Amount 26
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITEMIZED CONTRIBUTION	N (contributions totaling	-9-)	ζ'"
First Name DAI/10	Middle Name	Contribution Received For:	100 from any contribu	the contract of the said and the said of t
Last Name/Organization Name		f	<u>.</u>	Amount of Contribution
ATCHLEY		Primary Election	General Election	500.00
Address 1803 LAWNV	EW PLACE	Runoff (Local Elections	s Only)	300.00
WT JULIET	State Zip Code 37/22	Date of Contribution		Aggregate This Election
Occupation RETIRED Employer		8/22/20	9	500,00
First Name PUI/	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Primary Election	7 General Election	
Address 1018 DICKE	ENS BR.	Runoff (Local Elections	Only)	250,00
CILY MT JULIET	State Zip Code 37   2 2	Date of Contribution		Aggregate This Election
Occupation SALES WAL	HOER	8/22/21	·>	25000
WINCORE WI	NDOWS			
First Name DELMAR	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	1	☐ Primary Election 反	General Election	- Industry of Contradition
SMITH Address		]		150,00
City 1917 SHEND		Runoff (Local Elections C	Only)	
LEBANON	State Zip Code 37837	Date of Contribution		Aggregate This Election
Occupation RETIRED		xhala	21	
Employer		8/22/2		150.00
First Name				
PETER	Middle Name	Contribution Received For:	7	Amount of Contribution
Last Name/Organization Name SCHULERT		☐ Primary Election ☐ Ge	neral Election	
Address	051 00	Runoff (Local Elections On	hal	1600.00
City MAYS CHI			ly)	
11(1 30-12)	The Zin Code 37122	Date of Contribution	A	ggregate This Election
Occupation RETIRED Employer		8/22/20		1600,00
5. TOTAL ITEMIZED CONTRIBUTIONS	en e			
(Carry forward to item 3. of next page if additional pages of the list has been page of contributions, this amount must be	his form are used.) shown in item 15b. of summary 1			2500,00

OCT 13 2020

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE ON

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVE	
DAH WALKE	RF	OR MAY	COR	FROM: 7 20 20	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU					Amount 2500,00
4. COMPLETE THE APPROPRIATE ITEMS FOR E	EACH ITEM	ZED CONTRIBUTION	(contributions totaling more than \$	100	3
First Name SUSAW	Middle Nan	ne	Contribution Received For:		Amount of Contribution
Last Name/Organization Name SCHVLFRT			Primary Election 5	General Election	1600,00
Address 1912 MAYS CH	APE		Runoff (Local Election	s Only)	, in the second
MY JULIFT	\$# <u>11</u>	Zip Code 37122	Date of Contribution		Aggregate This Election
Occupation RETIREO Employer	<del> </del>		8/23 (2	20	1600,00
	<del></del>				
First Name ALPHOHSE -	Middle Nan	<b>12</b>	Contribution Received For:	,	Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	200,00
Address 711 LYHHWOOD	BLV		Runoff (Local Elections	Only)	
CHY HASHVILLE	State	Zip Code 37285	Date of Contribution		Aggregate This Election
Occupation RETIRED			8/27/20	÷	200,00
Employer					
First Name M 1243 Y	Middle Name	:	Contribution Received For:		Amount of Contribution
Last Name/Organization Name BEEBE	.L		Primary Election	General Election	300,00
Address 200 E DEL MI	かかれ	E	Runoff (Local Elections	Only)	
CLFW ISTOH	State FL	Zip Code 33440	Date of Contribution		Aggregate This Election
Occupation RETIRES			8/31/20		300:00
Employer			, ,		<del>-</del> ,
First Name	Middle Name	t 11 than a spectromorphism to the stand	Contribution Received For:		Amount of Contribution
ast Name/Organization Name			Primary Election	General Election	
Address	····		Runoff (Local Elections	Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation	<u></u>				
					1
mployer					

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OCT 13 2020

#### WILSON COUNTY ITEMIZED STATEMENT OF EXPENDITURESTION CANDIDATE

WER FOR WIF	TOR		RING THE PERIOD
			Amount
		<del></del>	ariori)
Middle Name		to any payor coming the pr	Amount of Expenditure
70:1166			
	ADVERTIS	ING	864.35
State   Zip Code   7   7   2   2	1		
Middle Name	Purpose of Expenditure		Amount of Expenditure
HIGHBER	1	(i.)	
VLIET RD	MOVER 1 (3	ING	300.00
State Zip Code 37122			
Middle Name	Purpose of Expenditure		Amount of Expenditure
17	AFSIC	Ĺ I	100/10
ST	PLIO	IV	106.46
State A Zip Code MA A 02481			
Middle Name	Purpose of Expenditure		Amount of Expenditure
		i	600,00
	DEDIGN	?	
State Zip Code 372   2			
Middle Name	Purpose of Expenditure		Amount of Expenditure
NG-	On Co.		633,81
<del>,</del>	MATIN	16	622,01
State   Zip Code   174   37   27			
Middle Name	Purpose of Expenditure		Amount of Expenditure
	AR Islam	416	1412 -
N.T.	ININT	146	1611721
-) ST	MINT	NG	143,24
	7111771	NG .	143,24
	FURES FROM PRECEDING PAGE  EACH ITEMIZED EXPENDITURE (  Middle Name  CONICLE  LIFT RO  State Zip Code 22  Middle Name  LAGUBEL  L	TURES FROM PRECEDING PAGE (enter \$0 if first iternized page (enter \$0 if first iternized page)  EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 purpose of Expenditure)  Middle Name Purpose of Expenditure  ADVECTS  State Zip Code Th 37122  Middle Name Purpose of Expenditure  ADVECTS  State Zip Code Th 37122  Middle Name Purpose of Expenditure  ADVECTS  State Zip Code ADVECTS  State A O2481  Middle Name Purpose of Expenditure  ADVECTS   TURES FROM PRECEDING PAGE (enter \$0 if first itemized page)  EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the page)  Middle Name  Purpose of Expenditure  ADVECTSING  State Zip Code TH 37122  Middle Name  Purpose of Expenditure  ADVECTSING  State Zip Code HM A 02481  Middle Name  Purpose of Expenditure  ACLES  AC	

## WILSON COUNTY ELECTION COMMISSION ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTE	2		
MA WA	LYBE FOR H	11 YOK FROM: 7/25	OVERING THE PERIOD
			Amount 20
3. TOTAL ITEMIZED CAMPAIGN EXPENDI	TURES FROM PRECEDING PA	GE (enter \$0 if first itemized page)	2647.86
		(expenditures totaling more than \$100 to any payee during	the period)
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		-	
ADVANCE	>16N2	- 51GNS	984.46
115 W MATIN		1 2/6/192	10,1,14
CITYLEARHOH	State Zip Code 37087		
First Name	Middle Name	Durance of Event dive	
	- Initial Harite	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name 51GNS OH CHE	AP	7	
Address a 5 A		516N5	1123,30
Address 15254 STONE HOLD		1 7 10 197	
""AVSTIH	State Zip Code TX 78758		
First Name			
	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name DESTGNEG GRA	111176	7	
Address	14116-2	516N5	1115.01
Address 12409 HWY 1555	OUTH	1	1115,01
TYLER	State Zip Code 十人 75703		
First Name			
	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name 1/15:TPA 5 [G	WC		
Address		516N5	492.77
City 275 WATMAH	· ; · · · · · · · · · · · · · · · · · ·	·	
WAITHAM	State Zip Code  MA A 02-18		
irst Name			
	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name MJ 5HIRT LUO	The		
Address	A .	T-SHIRTS	328,15
CHARLIE BANIE	<u> </u>		
MYJILLET	State Zip Code 37127		
FRANK	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name BUSH		Λ. Α	
ddress		MEASURY	3000,00
1864 LAKE MEADE			
ME JULIET	State Zip Code 77)22		
5. TOTAL ITEMIZED EXPENDITURES			
(Carry forward to item 3, of next page if additional pages	of this form are used.)		9691,55
(If this is the last page of expenditures, this amount must	be shown in item 19b. of summary.)		1 1///

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OUT 13 2020

#### WILSON COUNTY ITEMIZED STATEMENT OF EXPENDITURES CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	JEKFE FOR	UNAYOR 2. REPORT COY FROM: 7/28/3	ERING THE PERIOD  TO: q 3c 20
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	•		Amount 9/01
		expenditures totaling more than \$100 to any payee during the	
First Name LENA	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name RUSSOMAH+	10	KNIH PMICH	
Address 525 LAKESHO		CAMPAIGH	2799,25
City KLY JULIET	State Zip Code	MANAGER	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name STAPLES		SUPPLIES	267,54
Address		JUPICIL)	4 1,54
City WY JULIET	State Zip Code 1771 37122		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name LOWES			
Address		SUPPLIES	178,66
MY JULIET	State   Zip Code   1		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name UPS 54	OKE	SUPPLIES	200
Address		プレドレーン	384,13
WA JULIET	State Zip Code 1N 37   22		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name KROGEL		CAMPMGN	227 20
Address		CAMPAGA	227,39
"LAT JULIET	State Zip Code 111 31122	,	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name AUBLIX		CAMPAIGN	120 (1)
Address		CAMPAIGN FOOD	120,61
MT JULIET	State Zip Code 37122		
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of (If this is the last page of expenditures, this amount must	•		13,669,13

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#### WILSON COUNTY ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMM	IITEE		<del></del>	· · · · · · · · · · · · · · · · · · ·				
		CO.	C:0	i. 1.11	a C	2. REPO FROM:	RT COVE	RING THE PERIOD
JAH W	HLN	FX )	795	MHYC	715	7/2	9/20	10: /30/20
3. COMPLETE THE APPROPRIATE IT		ACH ITEMI	ZED LOA	N (loans totaling mor	e lhan \$100 from any ;		est molecularies was practically	, ,, ,, ,,
Complete the Following for the Source of the						e managaga a maka panak a managaga	and the second second second	
	ddle Name		Outstandi /Regioni	ng Loan Balance ng of Period)	Loans	Loan	Out	standing Loan Balance
SHE/LA  Last Name/Organization Name			-	<i>i i</i> .	Received	Payments		(End of Period)
L WALKER	·			$\frac{\varphi}{2}$	0,000	P	10	1000
2013 WOOD	PFS+	1:0	Loan Reci		<del></del>	Date of	fLoan	<u> </u>
City	te Zip C	ode	Prim	ary Election [	General Election	17	129	/20
Address 2013 WOODS  City HT JULIET Star	N 3	7127	Runc	off (Local Elections Only	=	/	•	1220
List All First Name	Endorsers or	Guarantors fo	or Above Lo	oan (If more space i	s Necded picase at		·	
First Natife	Middle	Name		First Name			Middle	Name
Last Name/Organization Name			······································	Last Name/Organiz	ation Name			
Address	<del></del>		<del></del>					
				Address				
City	State	Zip Co	de	City	· · · · · · · · · · · · · · · · · · ·	<del> </del>	State	Zip Code
Amount Guaranteed Outstanding		l						Zip Code
	and the same			Amount Guaranteed	Outstanding			
First Name	Middle N	Vame		First Name			Middle N	ame
Last Name/Organization Name				<u> </u>				•
				Last Name/Organizat	tion Name			
Address			-	Address	· · · · · · · · · · · · · · · · · · ·	<del></del>	***************************************	
City	State	Zip Code	······································	A1				
		Elp Cour		City			State	Zip Code
vnount Guaranteed Outstanding				Amount Guaranteed C	outstanding	<del></del>	<u></u>	
First Name	Middle Na	łme		First Name	the control of the second section of the section of the second section of the se			
ast Name/Organization Name				First Name			Middle Na	ame
ast reality of gamzation reality				Last Name/Organization	n Name	<del></del>	<del></del>	····
Address				Address	<del> </del>	<del></del>		
Dity	Low	T						
	State	Zip Code		City			State	Zip Code
nount Guaranteed Outstanding				mount Guaranteed Ou	tstanding	, <u></u>	<u> </u>	
rst Name		San a san a san a san a sa	enen unamer	and the second of the second of the second of				
	Middle Nan	ne	F	irst Name			Middle Nan	)e
st Name/Organization Name	<del></del>	<del></del>		ast Name/Organization	Name			
dress	·			.1 1				
	···		^	ddress				
у	State	Zip Code	c	ity			State	Zip Code
ount Guaranteed Outstanding			Ar	nount Guaranteed Outs	landino			
otals for all Loans (complete on last page of	Charles 1	Samuel Commence of the same			_			
utal loans received should also be shown in item 16, or	COMPOSITION OF THE	١	Ot	itstanding Loan Baland (Beginning of Period)	1	Loan	Out	standing Loan Balance
otal loan payments should also be shown in item 20. o otal outstanding loan balance should also be shown in it	CHERTON DOOR	<b>1</b>	F	7Annual OLLEHOO)	Received 10 000	Paymen	ls	(End of Period)
SS-1132 (Rev. 4/02)		r-5~/		<u> </u>	10 wo		10	1000

OCT 132020

# ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMI	ITEE	h : 15-60 1	ET WAYE	2. REPORT CO	VERING THE PE	RIOD
3 COMPLETE THE ADDRODUATE IT	KN WI	9LMFK	OK WAYOR	FROM: 1/24	20 TO:0	1/30/20
<ol> <li>COMPLETE THE APPROPRIATE IT OBLIGATION (obligations totaling mo person/vendor at the end of the report</li> </ol>	re than \$100 o	Wed to any	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Baland (End of Period)
First Name	Middle N	lame			<del>- Ţ</del>	
Last Name/Business Name		· · · · · · · · · · · · · · · · · · ·			 	
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Na	ime				
Last Name/Business Name			_			
Address						
	····			1		
City	State	Zip Code			i	
Description of Obligation				····		
First Name	Middle Nar	ne				
Last Name/Business Name			_			
Address	<del> </del>	· · · · · · · · · · · · · · · · · · ·	-			
City	24-1-	1	<u> </u>			
	State	Zip Code				
Description of Obligation						
First Name	Middle Nam	10				
ast Name/Business Name			-			
ddress			-			
ity	State	Zip Code	]			
escription of Obligation		Zip Code				
Obligazon						
rsi Name	Middle Name			State of the State	ar er	
st Name/Business Name		<del></del>			İ	
dress		······································				
ty	State	Zip Code				
scription of Obligation						
TOTALC						
TOTALS Total from Outstanding Balance - (End of Period in item 23b. on summary page.)	) column must al	so be shown	Ø	6	d	6
3	<del></del>		<u></u>			

#### ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS MEANUIDALE WILSON COUNTY

	THE STATE OF THE S	"WA	LKAC FA	OC WAYOR 2. REPOR	RT COVERING THE PERIOD
3. TOTAL ITEMIZED II	-KIND CONTRIRI	ITIONS ED	OM DDECEDING	PAGE (enter \$0 if first itemized page)	120 TO:9/30/20
4. COMPLETE THE APPL	ROPRIATE ITEMS FO	OR EACH IT	EMIZED IN-KIND CO	PAGE (enter \$0 if first itemized page)  ONTRIBUTION (in-kind contributions totaling more than \$100)	
First Name	thalese a calabra municipalista cues of the countries	Middle	Name		from any contributor during the period)
Last Name/Organization Name		1		In-Kind Contribution Received For: Primary Election General Ele	Value of In-Kind Contri
Address				Runoff (Local Elections Only)	
***************************************		·		Date of In-Kind Contribution	Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution	
Occupation	Employ	er			
First Name		Middle	Name	In-Kind Contribution Received For:	
est Name/Organization Name			<u> </u>	Primary Election General Elec	Value of In-Kind Contribution
address		<del></del>		Runoff (Local Elections Only)	
ity		- I		Date of In-Kind Contribution	Aggregate this Election
ccupation		State	Zip Code	Description of In-Kind Contribution	
oospaton,	Employe	•			
rst Name		Middle N	ame	In-Kind Contribution Received For:	Value of In-Kind Contribut
st Name/Organization Name	<u> </u>			Primary Election General Election	on Paide of M-Nitid Contribut
dress		<del></del>		Runoff (Local Elections Only)	
у		T Crate	170	Date of In-Kind Contribution	Aggregate this Election
cupation	Employer	State	Zip Code	Description of In-Kind Contribution	
	Спроув				
l Name	Anthony of the second s	Middle Nar	me	In-Kind Contribution Received For:	
Name/Organization Name			·	☐ Primary Election ☐ General Election	Value of In-Kind Contribution
ress		<del> </del>	·····	Runoff (Local Elections Only)	
1000				Date of In-Kind Contribution	Aggregate this Election
		State	Zip Code	Description of In-Kind Contribution	
pation	Employer		<u> </u>		
lame		Middle Name		In-Kind Contribution Received For:	
ame/Organization Name		1		Primary Election General Election	Value of In-Kind Contribution
SS		·····	· · · · · · · · · · · · · · · · · · ·	Runoff (Local Elections Only)	
		<u> </u>		Date of In-Kind Contribution	Aggregate this Election
alion		State	Zip Code	Description of In-Kind Contribution	
	Employer				
OTAL ITEMIZED IN-KIN Carry forward to item 3, of next p	D CONTRIBUTION	VS			
AID through in from 3 of sout a	ann if additional annua -	file f			1 1