CAMPAIGN FINANCIAL DISCLOSURE STATEMENTO

For State and Local Candidates For Single-Candidate Committees

APR 01 2022

DATE OF REPORT	2.a. NAME OF CA	NDIDATE OR COMMITTEE	El	WILSON COUNTY ECTION COMMISSION			
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE	2022			
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	State	Zip Code	Phone			
4.b. CANDIDATE'S HOME ADDRESS (if different	t than 4.a.)						
Street or Rural Route	Waterto	State IN	Zip Code 37184	Phone 615-295-4622			
5. OFFICE SOUGHT (include district number, if		6. NAME OF POLITICAL	TREASURER (may be	candidate)			
7. CATEGORY OR REPORT (Check one)		JUNIACO, VA	OI VC. I				
FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRE-	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING DATE OF REPO	RTING PERIOD				
Jan 1,2022		March 31,	2032				
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 detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.							
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 non signature of candidate.	ons and expenditures swear or affirm that	s required to be reported by the no campaign contributions had defined by the federal internations	e candidate committee ve been expended for t	by the Campaign			
11. WITNESS SIGNATURE	3/27/202	2 9	iture of witness	3/27/20 ZZ			
signature of witness	date 	O Signa	iul e oi wialess	uate			
12. SUMMARY							
a. BALANCE ON HAND LAST REPORT			\$	-			
b. TOTAL RECEIPTS THIS PERIOD							
c. TOTAL DISBURSEMENTS THIS PERIOD .		•••••	\$ 905.44	-			
d. BALANCE ON HAND (12.a. plus 12.b. n	ninus 12.c.)			<u> 195.56</u>			
e. TOTAL LOANS OUTSTANDING				s _ Ø			
f. TOTAL OBLIGATIONS OUTSTANDING				sØ			



APR 01 2022

SUMMARY PAGE - CANDIDATE

1	WILSON COUNTY					
13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT CENSOR COMMESSION					
Barney A. Smith Jr.	FROMDI/01/2022 TO:03/31/2022					
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	A 0.2 A 0					
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.)						
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.)	\$_1101.00					
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)					
\$						
\$						
\$						
\$	_					
\$						
\$						
\$						
* *						
\$						
	1/-					
Total of Expenditures (\$100 or less each payee)						
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 405.44					
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.)	\$ 90.44					
22.IN-KIND CONTRIBUTIONS						
a. Unitemized in-kind contributions (\$100 or less from each source this period)	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 ORLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	n 12.f)					





ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE WILSON COUNTY

2. REPORT COVERNO PAEGOMINISSION 1. NAME OF CANDIDATE OR COMMITTEE FROM DIO 2002 Samey A. Smith TO 03/31/2002 Amount Ol. 00 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) Contribution Received For: Amount of Contribution Middle Name First Name Primary Election ☐ General Election Last Name/Organization Name 250.00 Advance Runoff (Local Elections Only) Addre Date of Contribution Aggregate This Election 3 16/2022 Occupation Employer Contribution Received For: Amount of Contribution First Name Middle Name Frank & Primary Election General Election Last Name/Organization Name ADO.00 Runoff (Local Elections Only) Hollow Date of Contribution Aggregate This Election 3/21/2022 Amount of Contribution Contribution Received For. First Name viddle Name Primary Election General Election 151.00 Last Name/Organization Name bway Runoff (Local Elections Only) Aggregate This Election Zip Code 31184 Date of Contribution 3/8/2022 Contribution Received For Amount of Contribution Middle Name First Name Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Address Aggregate This Election Date of Contribution City State Zip Code Occupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS 901.00 (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)



ITEMIZED STATEMENT OF EXPENDITURES -

CANDIDATE

					LSON COUNTY			
1. NAME OF CANDIDATE OR COMMITTEE		1.			INCATEBRERICSION			
Barney A Smit	TO: 03 31 2022							
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 Nan	ne	Purpose of Expenditure	raide	Amount of Expenditure			
List Name/Business Name Design Group. Com Address		Signo \$	(ava s	905.44				
address Public Square City Water town	State	Zip Code 31184						
First Name	Middle Nam		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								
Address								
City	State	Zip Code						
First Name	Middle Nam	е	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								
Address								
City	State	Zip Code						
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
5. TOTAL ITEMIZED EXPENDITURES (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.)					905.44			