

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

RECEIVED
APR - 8 2022
WILSON COUNTY
ELECTION COMMISSION
K.M. 9:30 AM

1. DATE OF REPORT <u>4-5-22</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Friends of Terry Ashe</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Terry Ashe</u>		3. ELECTION DATE <u>2018</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route <u>1284 Holloway Rd.</u> City <u>Lebanon</u> State <u>TN</u> Zip Code <u>37090</u> Phone <u>615 547-7880</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route <u>1284 Holloway Rd</u> City <u>Lebanon</u> State <u>TN</u> Zip Code <u>37090</u> Phone <u>615 547-7880</u>			
5. OFFICE SOUGHT (include district number, if applicable) <u>DIST 12 County Comm. 50004</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Terry Ashe</u>	
7. CATEGORY OR REPORT (Check one)			
<input checked="" type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>1-6-22</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>4-31-22</u>	
9. (Check one)			
a. <input type="checkbox"/> 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. <input checked="" type="checkbox"/> 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.			
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.			
<u>Terry Ashe</u> signature of candidate		<u>Terry Ashe</u> signature of political treasurer	
<u>4-5-22</u> date		<u>4-5-22</u> date	
11. WITNESS SIGNATURE			
<u>Jamera B. Wade</u> signature of witness		<u>Jamera B. Wade</u> signature of witness	
<u>4-5-22</u> date		<u>4-5-22</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>17,666.87</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>0</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>1,600.00</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>16,066.87</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>0</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	



SUMMARY PAGE - CANDIDATE

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WILSON COUNTY

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="text-align: center; font-size: 1.2em; color: blue;">Friends of Terry Ashe</div>	14. REPORT COVERING THE PERIOD FROM: 4-6-22 TO: 4-31-22
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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) \$ 0

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 0

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

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, gasoline)

<u>Viet Nam Veteran Assoc</u>	\$ <u>100 00</u>
<u>Committee to Elect Randall Hutto</u>	\$ <u>500 00</u>
<u>Kurt Winstead for Congress</u>	\$ <u>1,000 00</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 1600.00

b. Itemized Expenditures (Over \$100 each payee this period) \$ 1600.00

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 1600 00

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 1600.00

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 0

b. Itemized in-kind contributions (over \$100 from each source this period) \$ 0

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 0

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ 0

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

WELLS COUNTY

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD	
			FROM: 1-6-22	TO: 4-31-22
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount	
			1600 ⁰⁰	
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		Amount of Expenditure
Last Name/Business Name		Donation		100 ⁰⁰
Vietnam Veterans Chapter				
Address				
City	State	Zip Code		
Lebanon	TN	37087		
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		Donation		500 ⁰⁰
Committee to Elect Randall Hutto				
Address				
City	State	Zip Code		
Lebanon	TN	37087		
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		Donation		1,000
Kurt Winstead for Congress				
Address				
City	State	Zip Code		
Nashville	TN	37205		
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
5. TOTAL ITEMIZED EXPENDITURES			Amount	
(Carry forward to item 3. of next page if additional pages of this form are used.)			1600 ⁰⁰	
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)				