

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT OUN

For State and Local Candidates

	d Local Candidates rdidate Committees
	CANDIDATE OR COMMITTEE TANKOW! (4)
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE 8/7/14
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City 1903 SUMMEN LAKE MT JULIET	State Zip Code Phone TN 37/22 6/5754 290 2
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City SAME AS ABOVE	State Zip Code Phone
5. OFFICE SOUGHT (include district number, if applicable)	6. NAME OF POLITICAL TREASURER (may be candidate)
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD FOURTH QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	PRE- PRE- MID-YEAR YEAR-END PRIMARY GENERAL SUPPLEMENTAL SUPPLEMENTAL 8.b. ENDING DATE OF REPORTING PERIOD
9. (Check one)	7/31/14
b. This campaign is required to file a detailed financial disclo and/or expenditures total more than \$1,000 for this reporting to the solemply swear or affirm that the information contained accurate accounting of campaign contributions and expenditures	osure because contributions (including in-kind) received total more than \$1,000 ing period. I in this campaign financial disclosure report is true and that this report is an a required to be reported by the candidate committee by the Campaign
signature of witness 7/31/201	+ / // // signature of witness date
12. SUMMARY a. BALANCE ON HAND LAST REPORT	\$\frac{42.45}{132.00}\$
b. TOTAL RECEIPTS THIS PERIOD	\$ 132.00
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 13d.00
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ 79.7
e. TOTAL LOANS OUTSTANDING	\$
f. TOTAL OBLIGATIONS OUTSTANDING	s



SS-1109 (Rev. 2/06)

SUMMARY PAGE - CANDIDATE

Las Contra		100,000	RECOLUMN TO
\$ JUL	31	2014	AU./

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14 PEDODE 00/	WILSON COURT
	14. REPORT COVE	RING, THE PERIO
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)		451/7
a. Unitemized Contributions (\$100 or less from each source this period)	s 0	
b. Itemized Contributions (over \$100 from each source this period)		_
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$ 132.00
16. LOANS RECEIVED THIS REPORTING PERIOD		s 0
17. INTEREST RECEIVED THIS REPORTING PERIOD		s 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.	nrinting postago a	analina)
	,, printing, postage, g	asonne)
\$		
\$	_	
\$	_	
	_	
*		
\$ \$		
\$		
\$	_	
Total of Expenditures (\$100 or less each payee)	\$	
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 132.00	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$	132.00
20. LOAN REPAYMENTS MADE THIS PERIOD	\$	0
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		
22.IN-KIND CONTRIBUTIONS	Ψ	
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)		
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)\$	\	
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12		0
,		



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1 NAME OF CANDIDATE OF COMMITTEE					
1. NAME OF CANDIDATE OF COMMITT	₹E			2. REPORT COV FROM: 7/1//	ERING THE PERIOD
				1/1/1	TO: 7/31/19
3. TOTAL ITEMIZED CAMPAIGN CONTR	IBUTIONS	FROM PRECEDING	PAGE (enter \$0 if first itemized p	page)	1
4. COMPLETE THE APPROPRIATE ITEMS F	OR EACH IT	EMIZED CONTRIBUTION	ON (contributions totaling more than	\$100 from any contribu	tor)
John Janlowy	Middle	Name	Contribution Received For:	/	Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	In In a
Address IA. 2					\$ /32.00
Address 1903 Summerdalle	/		Runoff (Local Election	ns Only)	
City MT Juliet	State	V Zipsopy/22	Date of Contribution		Aggregate This Election
Occupation	4	4 97.00	7/14/1	cl	
Employer Bus	19/			7	#331.00
Crady Barrel					051.00
First Name	Middle	Name	Contribution Received For:		
Last Name/Organization Name					Amount of Contribution
			Primary Election	General Election	
Address			Runoff (Local Election	s Only)	
City	State	Zip Code	Date of Contribution		
Occupation			Dute of Contribution		Aggregate This Election
occupation					
mployer			-		
irst Name	Middle N	ame	Contribution Received For:		Amount of Contribution
ast Name/Organization Name			Primary Election	General Election	
				Concrar Electron	
ddress			Runoff (Local Elections	Only)	
ity	State	Zip Code	Date of Contribution		Aggregate This Election
ccupation			1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Aggregate This Election
nployer			1		
st Name					
SUNGINE	Middle Na	ame	Contribution Received For:		Amount of Contribution
st Name/Organization Name			Primary Election	General Election	
dress			ļ _—		
			Runoff (Local Elections	Only)	
y	State	Zip Code	Date of Contribution		Aggregate This Election
cupation			1		
ployer			1		
TOTAL ITEMIZED CONTRIBUTIONS					4
(Carry forward to item 3. of next page if additional page	s of this form a	are used.)			#132.00
(If this is the last page of contributions, this amount must	st be shown in	item 15b. of summary.)			1-012 00
SS-1131(Rev. 2/06)			Desa	3.4	

Page _____ of ____

RDA 1159



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

A NAME OF CAMPIDATE OF COMMITTEE					CHOM COMMINION W
NAME OF CANDIDATE OR COMMITTEE	Joh.	1)ANKONI	cff	2. REPORT/COV	TO: 4/3///
3 TOTAL ITEMIZED CAMPAIGN EXPENDI				1/1	Amount
TOTAL ITEMIZED CAMPAIGN EXPENDIT COMPLETE THE APPROPRIATE ITEMS FOR					noriod)
First Name	Middle N	THE RESERVE OF THE PARTY OF THE	Purpose of Expenditure	o to any payee during the	Amount of Expenditure
Last Name/Business Name Atonicle of	MT	Juliet	40 C 385 C 6 45 40 30 50 60 C 60 45 C 60 60 C		_//
			Newspaper Adventisement		132.00
address Labanon Rd City MT Juliar	State 1/	V Zip Code 37122	110011/2/184114/17		
First Name	Middle N	The second secon	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			1		
Address			-		
City	State	Zip Code	-		
First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			1		
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 Nan	ne	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
ddress					
City	State	Zip Code			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
ddress					
ity	State	Zip Code			
 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 a be shown in	re used.) item 19b. of summary.)			4/32.00

SS-1129 (Rev. 4/02)

Page 4 of 4

RDA 1159