

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT COUNTY & CONTROLL OF COUNTY & CO ELECTION COMMISSION

For State and Local Candidates For Single-Candidate Committees

DATE OF REPORT	I					
	2.a. NAME OF (		COMMITTEE			
10 - 29 - 12	1 Billy	Weeks				
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTIO	N DATE	
4 - CAMPAIGN				11-06-	12	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	0:1			1.100		
The State of the S	City		State	Zip Code		Phone
222 Carver Lane	<u>-ebanon</u>		TN	37087	(615)	533-5441
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	than 4.a.) City		State	Zip Code		Phone
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME C	E POLITICAL	TDE ACUIDED		
Council Ward 5	-17	Kath	y Babb	TREASURER (	may be ca	indidate)
7. CATEGORY OR REPORT (Check one)		1100111	y Ouro	coya		
FIRST SECOND THIRD  QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRIMARY	PRE-	MID-YE		YEAR-END
8.a. BEGINNING DATE OF REPORTING PERIOD	J		GENERAL DATE OF REPO	SUPPLEM ORTING PERIOD	ENTAL	SUPPLEMENTAL
10-1-12		1	0.2-			
9. (Check one)						
This campaign is exempt from detailed tures total \$1,000 or less for this report	ing portou. (Comp	ete itellis 12u.,	12e. and 12f.)			
b. 🗹 This campaign is required to file a detai and/or expenditures total more than \$1	led financial disclo 000 for this reporti	sure because co ng period.	ontributions (ir	icluding in-kind)	received t	otal more than \$1,000
10 I/we do solemnly swear or affirm that the info accurate accounting of campaign contributions Financial Disclosure Act. Additionally, I/we sw benefit of the candidate or for any other nonpositions.	ear or affirm that n	o campaign cor defined by the fe	eported by the stributions hav deral internal	e candidate com	mittee by	that this report is an the Campaign personal financial
	date		signature of	political treasur	er	date
HATRY Bash Boyd	10/29/12		S			
signature of witness	date		signatu	re of witness		10   29   12 date
12. SUMMARY						
a. BALANCE ON HAND LAST REPORT				150	. 85	
b. TOTAL RECEIPTS THIS PERIOD				1400	.00	
c. TOTAL DISBURSEMENTS THIS PERIOD		•••••		1640	.00	
d. BALANCE ON HAND (12.a. plus 12.b. minu:	s 12.c.)				\$	90.85
e. TOTAL LOANS OUTSTANDING					\$	4813.43
f. TOTAL OBLIGATIONS OUTSTANDING					\$	-0-



## SUMMARY PAGE - CANDIDATE

WILSON COUNTY

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COV	/ERIN	IG THE PERIO
RECEIPTS	FROM: 10/01/12		10/27/12
15. CONTRIBUTIONS (other than loans and interest)			
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 1400.00		
b. Itemized Contributions (over \$100 from each source this period)	\$200.00		
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$_	1600.00
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	g., printing, postage,	gasol	ine)
\$			,
\$			
\$			
\$			
\$			
\$			
	_		
\$			
Total of Expenditures (\$100 or less each payee)	\$	•	
b. Itemized Expenditures (Over \$100 each payee this period)	1440.00	<u>.</u>	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		\$	1440.00
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			
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.)		\$	-0-
23. OBLIGATIONS			
a. Unitemized Obligations Outstanding (\$100 or less each)\$			
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 OR CO Billy Weeks	MMITTEE			2. REPORT COV	ERING THE PERIOD			
,	FROM: 10 01 112	TO: 10/27/12						
3. TOTAL ITEMIZED CAMPAIGN (	CONTRIBUTIONS F	ROM PRECEDING	G PAGE (enter \$0 if first itemized p	page)				
4. COMPLETE THE APPROPRIATE IT First Name	EMS FOR EACH ITE	MIZED CONTRIBUT		\$100 from any contribu	tor)			
Dave	Middle N	lame	Contribution Received For:	Contribution Received For:				
Last Name/Organization Name  Kirkey			☐ Primary Election ☐	General Election				
3794 Cairo Be	end Rd.		Runoff (Local Election	Runoff (Local Elections Only)				
Lebanon	State TN	Zip Code 37087	Date of Contribution		Aggregate This Election			
Occupation Retired								
Employer N/A			10 17 10		₩ 200.00			
First Name	Middle Na	ame	Contribution Received For:	Contribution Possitual Form				
Last Name/Organization Name				and the second s				
Address			Runoff (Local Elections					
City	State	Zip Code	Date of Contribution	s Only)				
Occupation	7000	Zip code	Date of Contribution		Aggregate This Election			
mployer								
irst Name	Middle Nam	ne	Contribution Received For:		Amount of Contribution			
ast Name/Organization Name			Primary Election	General Election				
ddress			Runoff (Local Elections	Only)				
ity	State	Zip Code	Date of Contribution		Aggregate This Election			
ccupation			-	h				
nployer			-					
st Name	Middle Name		Contribution Received For:					
st Name/Organization Name				C	Amount of Contribution			
dress	-		10 mm	General Election				
			Runoff (Local Elections	Only)				
	State	Zip Code	Date of Contribution		Aggregate This Election			
upation								
loyer								
TOTAL ITEMIZED CONTRIBUTION: (Carry forward to item 3. of next page if addition (If this is the last page of contributions, this amo	al pages of this form are	used.) m 15b, of summary.)			# 000 00			
					200.00			



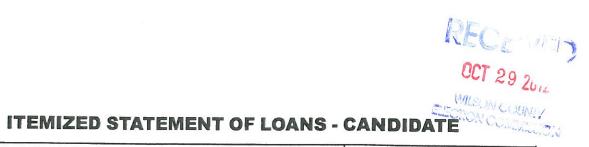
## ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

					FROM: 10/01/12	TO: 10/27/12			
Billy Weeks  3. TOTAL ITEMIZED IN-KIN	ND CONTRIBUT	TIONS ED	OM DDECEDING	PAGE (enter \$0 if first itemized page		Amount			
4. COMPLETE THE APPROPR	RIATE ITEMS FO	R EACH ITE	EMIZED IN-KIND CO	NTRIBUTION (in-kind contributions totaling	more than \$100 from any co	-0 -			
First Name			e Name		In-Kind Contribution Received For:				
Last Name/Organization Name				Primary Election		Value of In-Kind Contribu			
Address		-		Date of In-Kind Contribution	s Only)				
						Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employe	r							
First Name		Middle	Name	In-Kind Contribution Received		Value of In-Kind Contribu			
Last Name/Organization Name		!		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	General Election				
Address				Runoff (Local Elections  Date of In-Kind Contribution	s Only)	Agamentalities			
City		State	Zip Code			Aggregate this Election			
Occupation	Employer		Zip Code	Description of In-Kind Contribution					
	Employer								
First Name	Name Middle Name				For:	Value of In-Kind Contributi			
ast Name/Organization Name				5277003	General Election				
ddress				Runoff (Local Elections  Date of In-Kind Contribution	Only)	Aggregate this Election			
ity		State	Zip Code	Description of In-Kind Contribution					
cupation Employer									
rst Name		Middle Na	ame	In-Kind Contribution Received F	or: General Election	Value of In-Kind Contribution			
st Name/Organization Name				Primary Election					
dress				Date of In-Kind Contribution		Aggregate this Election			
у		State	Zip Code	Description of In-Kind Contribution					
cupation	Employer								
Name		Middle Nan	ne	In-Kind Contribution Received		alue of In-Kind Contribution			
Name/Organization Name					General Election				
ress				Runoff (Local Elections C					
		State	Zip Code			ggregate this Election			
		Otale	rib code	Description of In-Kind Contribution					
pation	Employer								



## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMM Billy Weeks	IITTEE			2. REPORT COVE	RING THE PERIOD		
,	TO: 10/21/12 Amount						
TOTAL ITEMIZED CAMPAIGN EXF     COMPLETE THE APPROPRIATE ITEM	IS FOR EACH IT	EMIZED EXPENDITUR	AGE (enter \$0 if first itemized page (expenditures totaling more than \$10	O to any pavee during the o	- 0 -		
First Name	Middle		Purpose of Expenditure	o to any payor during the p	Amount of Expenditure		
Last Name/Business Name Lebanon Democ	rat						
402 N. Cumber	land						
City Lebanon	State TN	Zip Code 37087	Advertisin	a	1250,00		
First Name	Middle	Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name  Jewell Signs  Address					*		
229 W. Forrest							
city Lebanon	State TN	Zip Code 37087	Campaign	Signs	410.00		
First Name	Middle N	ame	Purpose of Expenditure		Amount of Expenditure		
Lest Name/Business Name							
City	State	Zip Code					
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure		
ast Name/Business Name			7				
ddress			†				
City	State	Zip Code	-				
irst Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure		
st Name/Business Name							
ddress							
ty	State	Zip Code					
rst Name	Name Middle Name			1	Amount of Expenditure		
st Name/Business Name			]				
dress			1				
,	State	Zip Code					
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional (If this is the last page of expenditures, this amoun	pages of this form a	re used.)			11.1.0.0=		
					1660.00		



NAME OF CANDIDATE OR COMMITTEE							2. REPORT COVERING THE PERIOD					
Billy Weeks								FR	OM:		TC	
Billy Weeks 3. COMPLETE THE APPR	ROPRIATE ITEMS	FOR EACH	ITEMIZ	ZED LOAN	(loans totaling r	nore than \$	100 from any	source	during the p	eriod)		10/27/12
Complete the Following for the			-					1000			POLICE MAN	
First Name	First Name Middle Name Outst											ing Loan Balance
Last Name/Organization Name				, cognining	011 01100)	11000	(YCG	, 0,	monts		(End	d of Period)
					3.43	-0	) _	-0- 4813.4				
Address	Loan Recei											
City	State	Zip Code Prim			3.		ral Election					
					Runoff (Local Elections Only)							
First Name	List All Endo	To plant the same		or Above Loa	an (If more spa	ce is need	led please a	ttach	a page)	Dell'est de la		
riistiname		Middle Nam	е		First Name					Midd	le Nam	9
Last Name/Organization Name					Last Name/Org	anization N	ame					
Address					Address							
City		State	Zip Co	de	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
First Name Middle Name					First Name Middle Name						:	
Last Name/Organization Name					Last Name/Orga	anization Na	ame					
Address					Address							
City	City State Zip Code				City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guarant	eed Outsta	nding					
First Name		Middle Name			First Name					Middle	e Name	
Last Name/Organization Name					Last Name/Orga	nization Na	me					
Address					Address							
City		State	Zip Cod	e	City					State		Zip Code
mount Guaranteed Outstanding					Amount Guarante	eed Outstar	nding					
irst Name		Middle Name			First Name Middle Name							
ast Name/Organization Name					Last Name/Organization Name							
Address					Address							
City		State	Zip Code		City					State		Zip Code
mount Guaranteed Outstanding				1	Amount Guarante	ed Outstan	ding					
Totals for all Loans (complet	e on last page of it	emized loan	s)		Outstanding Loar		Loans		Loan	I	Outsta	anding Loan Balance
(Total loans received should also be s (Total loan payments should also be s	shown in item 20, on su	immary page.)		-	(Beginning of I		Receive		Paymen	its		End of Period)
Total outstanding loan balance should	also be shown in item	12.e. on front pa	age.)		4813.	43	-0-		-0-		4	813.43



### ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COI	MMITTEE			2. REPORT COVERING THE PERIOD				
Billy Weeks				FROM: 10/01/	12 TO: 1	0/27/12		
COMPLETE THE APPROPRIAT OBLIGATION (obligations totaling person/vendor at the end of the results)	g more than \$100 c	CH ITEMIZED owed to any	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balanc (End of Period)		
First Name	Middle I	Name						
Last Name/Business Name . Jewell Signs			-					
Address 229 W. Forrest			-					
City Lebanon	State	Zip Code 37087	1110.00					
Description of Obligation	an Signs	137087	410.00	-0-	410.00	-0-		
First Name	Middle N	ame						
	, madic (	is in C						
Last Name/Business Name			7					
Address			1					
City	State	Zip Code						
Description of Obligation								
First Name	Middle Na	ame						
Last Name/Business Name			-					
Address			1					
City	State	Zip Code	1					
Description of Obligation								
First Name	Middle Na	ma						
Last Name/Business Name	Wilder Her	THE STATE OF THE S			1			
					1			
Address			1					
City	State	Zip Code						
Description of Obligation				<u></u>				
First Name	Middle Nan	ne		I				
st Name/Business Name								
ddress								
Dity	State	Zip Code						
escription of Obligation		<u> </u>						
TOTALO								
. TOTALS (Total from Outstanding Balance - (End of F in item 23b. on summary page.)	Period) column must	also be shown	410.00	-0-	410.00			
- / F - G - /			110,00		710.00	-0-		