### CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

### For State and Local Candidates For Single-Candidate Committees

JUL 102020

1. DATE OF REPORT	2.a. NAME OF C	ANDIDATE OR C	OMMITTEE	-	WILSON COUNTY
7-9-20	Lav	14 Tor	nlinsor	ე <del>E</del> l	LECTION COMMISSION
2.b. IF COMMITTEE, NAME OF CANDIDATE		(		3. ELECTION DAT	. /
				Augus	st 6,2020
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		Ct-t-	7:-0-1-	
6798 Hartsville Pk.	City	_	State	Zip Code 37087	Phone 615-566-6593
4.b. CANDIDATE'S HOME ADDRESS (if different	than 4 a )	<u>~</u>	m	3/001	612-96-613
Street or Rural Route	City		State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME O	F POLITICAL T	REASURER (may b	e candidate)
Wilson Country School Board	200g 5	K	other (	G Adan	nS
7. CATEGORY OR REPORT (Check one)					
LJ LXJ LJ FIRST SECOND THIRD	L. <b>J</b> FOURTH	L[ PRE-	PRE-	MID-YEAR	YEAR-END
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY	GENERAL	SUPPLEMENTAL	
4-28-20		,	DATE OF REPOR		
9. (Check one)		(	30.2 رم	-0	****
,					
<ul> <li>a.     This campaign is exempt from detailed tures total \$1,000 or less for this report</li> </ul>	I disclosure because ting period. (Comp.	e contributions ( lete items 12d	including in-kind 12e and 12f )	d) received total \$1,0	000 or less AND expendi-
•			•		
<ul> <li>b.  This campaign is required to file a deta and/or expenditures total more than \$1</li> </ul>	alled financial disclo (,000 for this report	sure because co ing period.	ontributions (inc	luding in-kind) recei	ved total more than \$1,000
				v-=	
10. I/we do solemnly swear or affirm that the infe	ormation contained	in this campaig	n financial discl	losure report is true	and that this report is an
accurate accounting of campaign contribution	ns and expenditures	required to be i	reported by the	candidate committe	e by the Campaign
Financial Disclosure Act. Additionally, I/we so benefit of the candidate or for any other nonp	wear or anirm that i political purpose as	no campaign cor defined by the fe	ntributions nave ederal internal r	peen expended for evenue code.	the personal financial
	, ,			•	1 (
Jany lanking	7/18/20 gate	الادن الادن	Kater)	2 Alam	7/9/20
signature of candidate	date /	-	signature of	political treasurer	date
	**************************************				
11. WITNESS SIGNATURE					
alast C	9 ( 200	(	7	4-13.	7/9/02
signature of witness	date		signatu	re of witness	date
**************************************			0.9.1		Cuty
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT			\$	; <u> </u>	wa.
b. TOTAL RECEIPTS THIS PERIOD			4	3450	manufe.
	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	••••••••••	7/:50	-
c. TOTAL DISBURSEMENTS THIS PERIOD			\$	1490.0	<u>2</u> 3
d. BALANCE ON HAND (12.a. plus 12.b. mir	nus 12.c.)	•••••			\$ <u>999,77</u>
				V8-0-1	1000-
e. TOTAL LOANS OUTSTANDING		•			\$
f. TOTAL OBLIGATIONS OUTSTANDING					s <u>-0-</u>

### SUMMARY PAGE - CANDIDATE JUL 10 2020

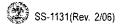
13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD						
Larry tomboson	FROM: 4- TEEZS PHOP WILLSON ZO						
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)							
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 400-						
b. Itemized Contributions (over \$100 from each source this period)	·\$ <u>2050-</u>						
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	s <u>2450-</u>						
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.)	<u>3450-</u>						
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)						
Vista Printing - printing \$ 87.70	<u>1</u>						
\$							
<b>\$</b>	<del></del>						
<b>\$</b>	A Mandanda						
<b>\$</b>	<del></del>						
<b>\$</b>							
*							
<u> </u>	_						
<b>\$</b>							
Total of Expenditures (\$100 or less each payee)	s 37.79						
b. Itemized Expenditures (Over \$100 each payee this period)							
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)							
20. LOAN REPAYMENTS MADE THIS PERIOD	s <u>-o-</u>						
20. LOAN REPAYMENTS MADE THIS PERIOD	s <u>2450.23</u>						
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.)	s <u>-0-</u>						
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 1	2.f.)\$ - O-						

JUL 1 0 2020

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE SSION

1. NAME OF CANDIDATE OR COMMITTEE				RING THE PERIOD
Larry T	Omlinson		FROM: 428-20	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU	TIONS FROM PRECEDING PAC	GE (enter \$0 if first itemized p	age)	Amount — O —
4. COMPLETE THE APPROPRIATE ITEMS FOR E	EACH ITEMIZED CONTRIBUTION (	contributions totaling more than s	100 from any contributo	ır)
First Name	Middle Name .	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	<u> </u>	Primary Election	General Election	
ralmore				1200-
Address 328 Shady	Cyeck LV.  State Zip Code 3 7211	Runoff (Local Election	s Only)	
City Nashville	Date of Contribution		Aggregate This Election	
occupation retived		5-11.	20	
Employer				
First Name A	Middle Name D .	Contribution Received For:		Amount of Contribution
Last Name/Organization Name  Kveidev		Primary Election	General Election	750-
Address 1145 Grant	Rd.	Runoff (Local Election	s Only)	
ay Watertown	State Zip Code 37/84	Date of Contribution		Aggregate This Election
Occupation Public Attain	s Officer	5-11-2	0	
National Geogra	phic Society			
First Name Vicki	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name  Odum		Primary Election	General Election	30
Address 3484 Mitc	hell Rd.	Runoff (Local Elections	s Only)	
City Lebanon	State Zip Code 37 087	Date of Contribution		<del>j</del>
			Aggregate This Election	
Occupation retired	7 001	5-16	-20	Aggregate This Election
retired	3,001	5-16	-20	Aggregate This Election
retired	Middle Name	S-16 Contribution Received For:	-20	Aggregate This Election
Employer  First Name  Last Name/Organization Name	Middle Name	Contribution Received For:	- ZeO General Election	Amount of Contribution
First Name  Last Name/Organization Name  Committee to ReElection	Middle Name	Contribution Received For:	General Election	
First Name  Last Name/Organization Name  Committee to ReElection	Middle Name	Contribution Received For:  Primary Election	General Election	Amount of Contribution
First Name  Last Name/Organization Name  Committee to ReElection Address  Po Box 1	Middle Name  ect Stratton Bour  572	Contribution Received For:  Primary Election  Runoff (Local Elections  Date of Contribution	General Election Only)	Amount of Contribution  250—
First Name  Last Name/Organization Name  Committee to ReElection  Address Po Box 1  City Lebanon	Middle Name  ect Stratton Bour  572	Contribution Received For:  Primary Election (K)  Runoff (Local Elections	General Election Only)	Amount of Contribution  250—

.1111 1 0 2020 ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDI WILSON COUNTY 1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVERING THE PERIOD MMISSION Tomknson LVVD. FROM: 4-22-20 TO: 6-30-20 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) First Name Middle Name Contribution Received For: Amount of Contribution Last Name/Organization Name Primary Election General Election 5mith 150 Runoff (Local Elections Only) Address City Date of Contribution Aggregate This Election Occupation 6-10.20 Employer Bank of Tennessel First Name Contribution Received For: Amount of Contribution Last Name/Organization Name Primary Election General Election Address Runoff (Local Elections Only) 00/e City Zip Code 287 Date of Contribution Aggregate This Election Occupation (0-9.20 miciar First Name Middle Name Contribution Received For: Amount of Contribution Last Name/Organi ☐ Primary Election General Election Address Runoff (Local Elections Only) City Date of Contribution Aggregate This Election 7077 Occupation 6-26-20 Employer First Name Middle Name Contribution Received For: Amount of Contribution Last Name/Organization Name Primary Election General Election Address Runoff (Local Elections Only) City State Zip Code Date of Contribution Aggregate This Election Occupation Employer



5. TOTAL ITEMIZED CONTRIBUTIONS

(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.)

JUL 102020

### ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR C	2. REPORT COVE	ERING THE PERIOD					
Larry Tanlinson					FROM: 4-28-2	0 TO: 6-30-20	
3. TOTAL ITEMIZED IN-KIND CO	ONTRIBUTION	ONS FROM	GE (enter \$0 if first itemized page	<del>3</del> )	Amount		
4. COMPLETE THE APPROPRIATE						ontributor during the period)	
First Name		Middle N		In-Kind Contribution Receive	In-Kind Contribution Received For:		
Last Name/Organization Name				Runoff (Local Election			
Address			Date of In-Kind Contribution	<u> </u>			
City State Zip Code			Description of In-Kind Contribution				
Occupation	Employer						
First Name		Middle Na	ame	In-Kind Contribution Receiver	Value of In-Kind Contribution		
Last Name/Organization Name					General Election		
Address				Date of In-Kind Contribution	☐ Runoff (Local Elections Only)  Date of In-Kind Contribution		
City		State	Zíp Code	Description of In-Kind Contribution			
Occupation Employer							
First Name		Middle Na	ime	In-Kind Contribution Received	1 For	Value of In-Kind Contribution	
Last Name/Organization Name					General Election	Takes of in faile contribution	
Last Name/Organization Name			Runoff (Local Election	s Only)			
Address				Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution			
Occupation	Employer						
First Name		Middle Name		1	In-Kind Contribution Received For:  Primary Election General Election		
Last Name/Organization Name		•		☐ Runoff (Local Elections		1	
Address				Date of In-Kind Contribution			
City		State	Zip Code	Description of In-Kind Contribution		1	
Occupation	Employer	<u> </u>					
irst Name							
		Middle Nam	16	In-Kind Contribution Received	d For: General Election	Value of In-Kind Contribution	
ast Name/Organization Name				Runoff (Local Elections			
Address		Date of In-Kind Contribution		Aggregate this Election			
City State Zip Code			Description of In-Kind Contribution	· · · · · · · · · · · · · · · · · · ·			
Occupation Employer			7				
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS  (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)							

JUL 102020

### ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE			ELEC 2. REPORT COVER	CTION COMMISSION					
Larry 7	TO: 6.30.20								
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT	Amount - O -								
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 Halo Brandled S Address 1500 Hato La City Sterling		Signs		563.19					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
Last Name/Business Name  Dewell Signs  Address  229 West i  City  Lebanon		Signs		187.50					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
Last Name/Business Name  Fremier Sign  Address  1018 McCra  City  Lebanon	Address 1018 McCrary Rd.  City State ZipCode			242.00					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
Last Name/Business Name WANT  Address POBOX  City  Labanan	399 State Zip Code TV 37088	advertis	sing	600-					
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure						
Last Name/Business Name Syns No. Address  Address  Address  City  Lebanon	N Le St. State Zip Code 77087	Signs		769.75					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure					
Last Name/Business Name Address									
City	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				2362.44					

### ITEMIZED STATEMENT OF LOANS - CANDIDATE LISON COUNTY

NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD ISS					
Larry Tomlinson							Γ	FROM:		TO: 6-30-20
3. COMPLETE THE APPROPRIA	TEVTEMS FOR	REACHI	TEMIZ	ED LOAN	(loans totaling r	nore than \$1	100 from any so	urce during the	period)	
Complete the Following for the Source	of the Loan									
First Name Middle Name C  Last Name/Organization Name				g Loan Balance Loans Loan Outstanding Loan Bala g of Period) Received Payments (End of Period)						
Tomlin	Son	-		***************************************	<del>26</del>	- 1000- 1000-				
6798 Hortsville PK Derim				Loan Receiv		Gene	ral Election	Date of L		
City State Zip Code 3 1 087 🗖 Runoff (Local Elections Only)					<del>1.5.1</del>		4-2	28-20		
	List All Endorsers		ntors fo	r Above Loa		ce is need	led please atta	ach a page)		
First Name	Mid	iddie Name			First Name				Middle	e Name
Last Name/Organization Name					Last Name/Org	janization N	ame			
Address			•		Address					
City	Sta	ate	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/Organization Name						
Address				Address						
City	State Zip Code City State					Zip Code				
Amount Guaranteed Outstanding					Amount Guaran	teed Outsta	nding		<b></b>	
First Name	Mid	idie Name			First Name				Middle	e Name
Last Name/Organization Name	*****				Last Name/Organization Name					
Address	····				Address					
City	Stat	ite	Zip Cod	le	City	<del></del>			State	Zip Code
Amount Guaranteed Outstanding		I			Amount Guarani	teed Outstar	nding		<u> </u>	<u> </u>
First Name	Midd	ldie Name			First Name Middle Name					
Last Name/Organization Name				Last Name/Organization Name						
Address					Address					
City	State	te .	Zip Cod	е	City			<u> </u>	State	Zip Code
Amount Guaranteed Outstanding	<u></u>			<b>/</b>	Amount Guarant	eed Outstan	nding		_1	<u> </u>
4. <b>Totals for all Loans (complete on la</b> (Total loans received should also be shown in			s)		Outstanding Loa (Beginning of		Loans Received	Loa	an nents	Outstanding Loan Balance
(Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)			ţ	— ()-		1000		ICI IIO	(End of Period)	

JUL 10 2020

## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE MISSION

NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED			Outstanding Balance	FROM: 4-28.	- كين TO: (	G-30-20	
OBLIGATION (obligations totaling more that	DMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED BLIGATION (obligations totaling more than \$100 owed to any serson/vendor at the end of the reporting period)			Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
First Name	Middle N	ame				<u> </u>	
Last Name/Business Name		·	·····				
Address							
City	State Zip Code						
Description of Obligation	<u> </u>			<u> </u>		<u> </u>	
First Name	Middle N	ame					
Last Name/Business Name	<u> </u>					!	
Address							
City	State	Zip Code					
Description of Obligation	<u>.l</u>	. <b></b>			<u> </u>	<u> </u>	
First Name	Middle Na	me					
Last Name/Business Name		PTT0+ 2-10-10-1-1-1					
Address						•	
City	State	Zip Code					
Description of Obligation						·	
First Name	Middle Na	me					
Last Name/Business Name	<u></u>		-				
Address							
City	State	Zip Code					
Description of Obligation	1					*···	
First Name	Middle Na	me					
Last Name/Business Name	<u> </u>		-				
Address				}			
City	State	Zip Code					
Description of Obligation	I	<u> </u>			<u> </u>		
<ol> <li>TOTALS         (Total from Outstanding Balance - (End of Period) c in item 23b. on summary page.)     </li> </ol>	olumn mus	t also be shown				-6-	