CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

	Single-Candid	ate Committe	es	UL 28 2022
1. DATE OF REPORT July 25, 2022	2.a. NAME OF CANDIDA Belita Way	ATE OR COMMITTEE	W	ILSON COUNTY
2.b. IF COMMITTEE, NAME OF CANDIDATE	a)ene were		3. ELECTION DATE	COMMISSION
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	city Lebanon,	State	Zip Code 37087 6/5	Phone -513-8/56
4.b. CANDIDATE'S HOME ADDRESS (if differen Street or Rural Route		State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, i	f applicable) 6.	NAME OF POLITICAL Belita, MCM	TREASURER (may be o	andidate)
7. CATEGORY OR REPORT (Check one)	FOURTH PR	ARY GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b.	ENDING DATE OF REPO	_	
9. (Check one) a.	orting period. (Complete literation trailed financial disclosure b	ecause contributions (ii)	
10. Dwe do solemnly swear or affirm that the ir accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other nor signature of candidate	ons and expenditures requi	npaign contributions had by the federal interna	ve been expended for the	
11. WITNESS SIGNATURE Signature of witness	July 25, 2022	Rose	Hostings ature of withess	Tuly 25 722
SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD			\$ 244.15 \$ 852.00 \$ 700.00	
d. BALANCE ON HAND (12.a. plus 12.b. n				396.15
e. TOTAL LOANS OUTSTANDING			\$	-0-
f. TOTAL OBLIGATIONS OUTSTANDING			\$	-0-



JUL 28 2022

			WILSON	COUNTY				
13	NAME OF CANDIDATE OR COMMITTEE (In Full) BELTO NEW YORK THE		M: Tuly 1, 2022	TO: July 25, 2022				
RI	CEIPTS CONTRIBUTIONS (other than loans and interest)			1				
	a. Unitemized Contributions (\$100 or less from each source this period)	\$	352,00	5				
	b. Itemized Contributions (over \$100 from each source this period)	\$	500,00	•				
	c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)\$							
	6. LOANS RECEIVED THIS REPORTING PERIOD\$							
	7. INTEREST RECEIVED THIS REPORTING PERIOD\$							
18.	TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)			\$ 024,00				
DI	SBURSEMENTS							
	EXPENDITURES (other than loan payments)							
a	i. Expenditures (\$100 or less each payee this period) (must be listed by category - e.	g., prii	nting, postage, ga	asoline)				
	* *	_						
	\$							
	\$	_						
	\$							
	\$							
	\$	_						
	\$							
	\$							
	\$	_						
		e	1					
T	otal of Expenditures (\$100 or less each payee)	ֆ <u>—</u>	7100.00	A				
b.	Itemized Expenditures (Over \$100 each payee this period)	>	100100	700,00				
C.	TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)							
	LOAN REPAYMENTS MADE THIS PERIOD							
	TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)			\$ 100,00				
22	IN-KIND CONTRIBUTIONS		0					
a.	Unitemized in-kind contributions (\$100 or less from each source this period)		/ / 4	8				
b.								
C.	TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b	.)		\$				
23	OBLIGATIONS							
a.	•		~	8				
b.	Itemized Obligations Outstanding (Over \$100 each)	\$	4)	~				
	TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	n 12.f.)		\$				

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATEUNTY

NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVER	TO: 77/16/11
Belita McMurry-Fite		111011111111111111111111111111111111111	Amount Amount
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM	PRECEDING PAGE (enter \$0 if first itemize	ed page)	* 352.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED	CONTRIBUTION (contributions totaling more	han \$100 from any contributor	Amount of Contribution
First Name Middle Name	Contribution Received	-or:	Amount of Contribution
Last Name/Organization Name	☐ Primary Election	General Election	\$50.00
Brooks	Runoff (Local El	actions Only)	50.00
Address P-DCBOX 1614			A 70 F1 (0.00
City Lebayor State Zin	p Code Date of Contribution		Aggregate This Election
Occupation House Wife	July 8		
Employer	,		
First Name Middle Name	Contribution Received	For:	Amount of Contribution
Angela Williams N	Primary Election	General Election	. An
Last Name/Organization Name	8		\$ 50.00
Address 802 Apt. 16 West Min St	Runoff (Local El	ections Only)	A
City Murfretsporo State Zi	p Code Date of Contribution		Aggregate This Election
Occupation Computer Analyst	Ju	47,2022	
Employer		. ,	
1 42.1. 40/21/45	I		
A-W: DESIGNS	Contribution Received	I For:	Amount of Contribution
First Name Middle Name			
First Name Debra Last Name/Organization Name	Contribution Received	For: General Election	Amount of Contribution
First Name Debra Last Name/Organization Name Address		General Election	
First Name Debra Last Name/Organization Name Crutcher Address 1413 (Arthage Highway)	Primary Election Runoff (Local Election) ip Code 37087	General Election	
First Name Debra Last Name/Organization Name Crutchar Address 4/3 Arthary Highway City City Cocupation	Primary Election Runoff (Local Election) ip Code 37087	General Election	100-00
First Name Debra Last Name/Organization Name Crutcher Address 413 (Arthree Highway City Libaron State 72	Primary Election Runoff (Local Election) ip Code 37087	General Election	100-00
First Name Debra Last Name/Organization Name Crutchak Address 413 (Arthago Highway City Libaran Occupation Pattired Employer	Primary Election Runoff (Local Election) ip Code 37087	General Election ections Only)	100-00
First Name Debra Last Name/Organization Name Crutcher Address 4/3 Arthree Highway City State Occupation Employer First Name Landress Address Middle Name	Primary Election Runoff (Local Election) Date of Contribution Contribution Received	General Election ections Only) 3, 202	Aggregate This Election Amount of Contribution
First Name Debra Last Name/Organization Name Crutchar Address 1413 Carthaga flighway City Docupation First Name Middle Name	Primary Election Runoff (Local Election) Date of Contribution Contribution Received Primary Election	General Election actions Only) 3, 2, 2, 2, 2, 2 For: General Election	Aggregate This Election Amount of Contribution # 76.00 linds
First Name Debra Last Name/Organization Name Crutcher Address 4/3 Arthree Highway City State Occupation Employer First Name Landress Address Middle Name	Primary Election Runoff (Local Election) Date of Contribution Contribution Received Primary Election Runoff (Local Election)	General Election actions Only) 3, 2, 2, 2, 2, 2 For: General Election	Aggregate This Election Amount of Contribution # 76.00 Linda 76.00 Gloria
First Name Last Name/Organization Name Crutchar Address 413 Arthree Highway City State City State Employer First Name Last Name/Organization Name Address Address Address Address Address	Primary Election Runoff (Local Election) Date of Contribution Contribution Received Primary Election Runoff (Local Election) Date of Contribution	General Election actions Only) 3, 2, 2, 2, 2, 2, 2, 2, 2, 3, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	Aggregate This Election Amount of Contribution # 76.00 linds
First Name Crutchar Address Address City Ci	Primary Election Runoff (Local Election) Date of Contribution Contribution Received Primary Election Runoff (Local Election) Date of Contribution	General Election actions Only) 3, 2, 2, 2, 2, 2 For: General Election	Aggregate This Election Amount of Contribution # 76.00 Linda 76.00 Gloria
First Name Crutcher Address Address City City City City First Name Last Name/Organization Name Last Name/Organization Name Address City State Eshabet City City State State State City State State State Address City City State State City State State City State State City City State State City City	Primary Election Runoff (Local Election) Date of Contribution Contribution Received Primary Election Runoff (Local Election) Date of Contribution	General Election actions Only) 3, 2, 2, 2, 2, 2, 2, 2, 2, 3, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	Aggregate This Election Amount of Contribution # 76.00 Linda 76.00 Gloria
First Name Crutcher Address Address City Ci	Primary Election Runoff (Local Election) Date of Contribution Contribution Received Primary Election Runoff (Local Election) Page of Contribution Date of Contribution	General Election actions Only) 3, 2, 2, 2, 2, 2, 2, 2, 2, 3, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	Aggregate This Election Amount of Contribution # 76.00 Linda 76.00 Gloria

SS-1131(Rev. 2/06)

UAWLieburumith

Page ____ of __ # RDA 1159

= \$52.00

= \$52.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS CANDIDATE

	A AN ALTTEE				REPORT COVER	ING THE PERIOD	
NAME OF CANDIDATE OR COMMITTEE Belifa McMurry The					FROM: 7/1/22	TO: 7/25/22	
3. TOTAL ITEMIZED IN-KIND COI	NTRIBUTIONS	S FROM I	PRECEDING PAGE (enter \$0 if first itemized page)		
4. COMPLETE THE APPROPRIATE IT	EMS FOR EAC	H ITEMIZI	ED IN-KIND CONTRIBU	TION (in-kind contributions totaling r	more than \$100 from any con		
First Name Middle Name			In-Kind Contribution Received For: Primary Election General Election Value of In-Kind				
Last Name/Organization Name				Runoff (Local Election	ns Only)		
Address				Date of In-Kind Contribution	Aggregate this Election		
City		State	Zip Code	Description of In-Kind Contribution			
Occupation	Employer						
First Name		Middle Nam	е	In-Kind Contribution Received	d For: General Election	Value of In-Kind Contribution	
Last Name/Organization Name				Runoff (Local Election	ns Only)		
Address				Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution			
Occupation	Employer						
First Name		Middle Nam	е	In-Kind Contribution Received	d For: General Election	Value of In Kind Contribution	
Last Name/Organization Name			Runoff (Local Elections Only)				
Address				Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution			
Occupation	Employer						
First Name		Middle Nam	e	In-Kind Contribution Received	d For: General Election	Value of In-Kind Contribution	
Last Name/Organization Name				Runoff (Local Election			
Address				Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution			
Occupation	Employer						
			essenti de sente de		and the state of t	Delin at la Mari Carathana	
First Name	1	Middle Name		In-Kind Contribution Received Primary Election	ed For: General Election	Value of In-Kind Contribution	
ast Name/Organization Name				Runoff (Local Election	ns Only)		
Address				Date of In-Kind Contribution		Aggregate this Election	
City	3	State	Zip Code	Description of In-Kind Contribution		\	
Occupation	Employer						
 TOTAL ITEMIZED IN-KIND CO (Carry forward to item 3. of next page if a (If this is the last page of in-kind contribut 	dditional pages of	this form are	e used.) wn in item 22b. of summary.)		9	
CONTRACTOR OF THE PARTY OF THE						44FA	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COV	ERING THE PERIOD				
Belifa MMury	Fife	FROM: 4/1/22	7 TO: 7/25/22				
	Amount /						
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	700						
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				
Super Speak Way	<u> </u>		#200,00				
Last Name/Business Name	line	Does For Campaign					
Address		acces 101					
Muless	1 - 1 - 2 /	Congress					
City) @ Core	State Zip Code	ocatons					
adenon	The state of the s	Purpose of Expenditure	Amount of Expenditure				
First Name	Middle Name		1.				
Last Name/Business Name		Id Alma Halden Grans	Transla				
Criticher		(4eg) 7001/19 190	160.00				
Address 1413 Carthal	Highway	(telping Holding Signs					
City	State Zip Code						
Lebourn	YN 37087						
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure				
(pale)		11000					
Last Name/Business Name		Heping to Holdsign for Champaign and meads	\$ 100,00				
Address Hunsens Pa	inte	For Gan paigh					
City	State Zip Code	On Don do de					
Lebaron	M 3/081	and meage	Water and the same				
First Name C/a	Middle Name	Purpose of Expenditure	Amount of Expenditure				
JASTY		ilosom Hold Sians	4 1 00				
Last Name/Business Name		Herbid Mary 112	1.6-10/01/				
1/1/4 - /1 -			# 100,00				
Address / William Land	/	andneals	A 100100				
a Hillyop Lane	State Zip Code	Helping Hold Signs and meals					
Address & Hilltop Lane City Holage #		andmeals					
City Arthoge #		Ound meals Purpose of Expenditure	Amount of Expenditure				
City Hoge #	State Zip Code 37030	Purpose of Expenditure	Amount of Expenditure				
City Arthoge #	State Zip Code 37030	Purpose of Expenditure	Amount of Expenditure				
City Hoge #	State Zip Code 37030	Purpose of Expenditure	Amount of Expenditure				
City Arthoge First Name Last Name/Business Name Address Address	State Zip Code 37030 Middle Name		Amount of Expenditure				
City A Hoge First Name Last Name/Business Name Luster	State Zip Code 37030	Purpose of Expenditure	Amount of Expenditure				
City Horge First Name Last Name/Business Name Address Ham Hor Station City Lellowon	State Zip Code 37030 Middle Name	Purpose of Expenditure	Amount of Expenditure Amount of Expenditure				
City Arthoge First Name Last Name/Business Name Address Address	State Zip Code 37030 Middle Name State Zip Code 37087	Purpose of Expenditure Holding Campaign Sign Authority Purpose of Expenditure	Amount of Expenditure Amount of Expenditure				
City Hist Name Last Name/Business Name Lustro City Lustro City Lustro City Lustro Lu	State Zip Code 37030 Middle Name State Zip Code 37087	Purpose of Expenditure Holding Campaign Sign auf Meals	Amount of Expenditure				
City First Name Last Name/Business Name Address City First Name Last Name/Business Name Last Name/Business Name Reffaces	State Zip Code 37030 Middle Name State Zip Code 7087 Middle Name	Purpose of Expenditure Holding Campaign Sign Authority Purpose of Expenditure	Amount of Expenditure Amount of Expenditure				
City Hist Name Last Name/Business Name Lustro City Lustro City Lustro City Lustro Lu	State Zip Code Middle Name State Zip Code A 7087 Middle Name	Purpose of Expenditure Holding Campaign Sign Authority Purpose of Expenditure	Amount of Expenditure Amount of Expenditure				
City First Name Last Name/Business Name Address City Last Name/Business Name Last Name/Business Name Address Address Address Address Address Address Address	State Zip Code 37030 Middle Name State Zip Code 7087 Middle Name	Purpose of Expenditure Holding Campaign Sign Authority Purpose of Expenditure	Amount of Expenditure Amount of Expenditure				
City First Name Last Name/Business Name Address City Last Name/Business Name Last Name/Business Name Address City Cit	State Zip Code Middle Name State Zip Code A 7087 Middle Name	Purpose of Expenditure Holding Campaign Sign Authority Purpose of Expenditure	Amount of Expenditure Amount of Expenditure				
City First Name Last Name/Business Name Address City Last Name/Business Name Last Name/Business Name Address Address Address Address Address Address Address	State Zip Code Middle Name State Zip Code 37087 Middle Name	Purpose of Expenditure Holding Campaign Sign Authority Purpose of Expenditure	Amount of Expenditure Amount of Expenditure				

ITEMIZED STATEMENT OF LOANS - CANDIDATE TION COUNTY

1. NAME OF CANDIDATE OR	COMMITTEE	12	7						COVER	ING THE PERIOD
Belita MCA	MUSTY-	-Fr	le	/			1	ROM: 1/2	2	7/25/22
3. COMPLETE THE APPROPR	IATE ITEMS	FOR EACH	ITEMIZ	ZED LOAN	(loans totaling r	nore than \$10	00 from any sourc	e during the pe	eriod)	7 /
Complete the Following for the Sour	ce of the Loan									
First Name	Middle Na	me		Outstanding (Beginning	Loan Balance of Period)	Loans Receiv		Loan ayments		anding Loan Balance (End of Period)
Last Name/Organization Name							X			
Address				Loan Receiv		☐ Genera	al Election	Date of Loa	an	
City	State	Zip Code		☐ Runoff	(Local Elections		/			
	List All Endo	rsers or Guar	antors fo	or Above Loa	n (If more spa	ce is neede	ed please attacl	h a page)	No.	
First Name		Middle Nam	e		First Name				Middle	Name
Last Name/Organization Name					Last Name/Ou	anization Na	arne			
Address				/	Address					
City		State	Zip Co	ode	SW.				State	Zip Code
Amount Guaranteed Outstanding		1,		/	Amount Guara	nteed Outstai	nding		11/	
First Name		Middle Nam	e		First Name				Middle	Name
Last Name/Organization Name				/	Last Name/Org	ganizationNa	me			
Address			/	/	Address					
City		State	₹ p Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding			/		Amount Guara	nteed Outstar	nding			
First Name	THE STATE OF	Middle Name	e		First Name			1	Middle	Name
Last Name/Organization Name					Last Name/Org	anization Na	me	//	\	
Address		/			Address				1	
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding	-0				Amount Guarar	nteed Outstar	nding			
First Name	17	Middle Name	e		First Name		S-1-1-1111		Middle	Vame ,,
Last Name/Organization Name	1/				Last Name/Org	anization Na	me			
Address	-				Address					
City		State	Zip Co	de	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guarar	nteed Outstar	nding			
4. Totals for all Loans (complete or (Total loans received should also be show (Total loan payments should also be show	n in item 16. on s	summary page.)	T TWEE	Outstanding Lo (Beginning o	oan Balance of Period)	Loans Received	Loa Paym		Outstanding Loan Balance (End of Period)
(Total outstanding loan balance should also	be shown in iter	n 12.e. on front	, page.)		cf	1	7	H)	0

...CLIVED

JUL 28 2022

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE OMMISSION

1. NAME OF CANDIDATE OR COM	2. REPORT COVERING THE PERIOD				
3. COMPLETE THE APPROPRIATE OBLIGATION (obligations totaling	Outstanding Balance (Beginning of Period)	FROM: Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
person/vendor at the end of the re	Middle Name				PART BERNALD SECTION AND ADDRESS OF THE PART OF THE PA
Last Name/Business Name					
Address		_ / - ~)//	
7	State Zip Code		1	Y(/	(
City	Cidio				
Description of Obligation				THE REPORT OF	
First Name	Middle Name		1	0	1
Last Name/Business Name				1	
Address					
City	State Zip Code				
Description of Obligation		1			
First Name	Middle Name			_	
Last Name/Business Name					
Address			/	1	V 71
City	State Zip Code				
Description of Obligation					
First Name	Middle Name		1	6	
Last Name/Business Name					$\langle - \rangle +$
Address			-	1	
City	State Zip Code				
Description of Obligation					
First Name	Middle Name	8	1		P
Last Name/Business Name				/	(
Address			/		
City	State Zip Code				
Description of Obligation					
 TOTALS (Total from Outstanding Balance - (End o in item 23b. on summary page.) 	of Period) column must also be shown	(1)		0	0
00 4407 (0 4/00)			Page	of	RDA 1159