CAMPAIGN FINANCIAL DISCLOSURE STATEMENT RECEIVED

For State and Local Candidates For Single-Candidate Committees

101	Jingio Car				ne:	7 7 7 7000
1. DATE OF REPORT	2.a. NAME OF CA	ANDIDATE OR O	COMMITTEE		100	1 1 1 2022
2.b. IF COMMITTEE, NAME OF CANDIDATE	BellTa IV	1 Murr	y TITE	3. ELECTION [DATECTIO	ON COUNTY ON COMMISSION
2.b. IF COMMITTEE, NAME OF CANDIDATE				200	12	H COMMISSION
4.a. CAMPAIGN ADDRESS AND PHONE	City		State	Zip Code		Phone
Street or Rural Route	City	12	TN.	37087	615-	573-8156
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	t than 4.a.) City	/	State	Zip Code	F	Phone
OFFICE SOUGHT (include district number, if	f applicable)	6. NAME	OF POLITICAL	TREASURER (ma	ay be canc	didate)
1 +banon Special School Distri	ct School Board	Bel	to MCM	28ry Fit	he_	
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD	FOURTH	PRE- PRIMARY	PRE- GENERAL	MID-YEA SUPPLEMEN		YEAR-END SUPPLEMENTAL
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	8.b. ENDING	DATE OF REPO		11111	OT PERMITTING
7-26-22		9	-30-3	12		
9. (Check one)						
a. This campaign is exempt from detaile tures total \$1,000 or less for this repo	rting period. (Compl	iete items 120	., 12e. and 121.)	•		
 This campaign is required to file a det and/or expenditures total more than \$ 	tailed financial disclo i1,000 for this reporti	sure because ing period.	contributions (ir	ıcluding in-kind) r	eceived to	tal more than \$1,000
10. I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution. Financial Disclosure Act. Additionally, I/we sharefit of the candidate or for any other non signature of candidate.	ons and expenditures	s required to be no campaign of defined by the	contributions have federal internal	ve been expende	d for the pe	
11. WITNESS SIGNATURE Signature of witness	A+4,200	7 _	Pare signa	ture of witness		Oct 42022
12. SUMMARY				201	1-	
a. BALANCE ON HAND LAST REPORT	•••••	***************************************		\$ 3964	5	
b. TOTAL RECEIPTS THIS PERIOD				049.	51	
c. TOTAL DISBURSEMENTS THIS PERIOD .			.,	\$	21	
d. BALANCE ON HAND (12.a. plus 12.b. m	ninus 12.c.)				\$	-0
e. TOTAL LOANS OUTSTANDING					\$	0
f. TOTAL OBLIGATIONS OUTSTANDING					\$ —	-



SUMMARY PAGE - CANDIDATE

OCT 112022

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD						
Belte MeMory Fite	FROM: 7-26-12-ION HOMMISSION						
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)							
a. Unitemized Contributions (\$100 or less from each source this period)	s <u>500.00</u>						
b. Itemized Contributions (over \$100 from each source this period)	ss						
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and	d 15.b.)\$ <u>2 00.00</u>						
16. LOANS RECEIVED THIS REPORTING PERIOD	\$						
17. INTEREST 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.)\$ <u>300.600</u>						
DISBURSEMENTS							
19. EXPENDITURES (other than loan payments)							
a. Expenditures (\$100 or less each payee this period) (must be listed by cat	regory - e.g., printing, postage, gasoline)						
Debra Crutcher \$_	100.00						
Sharon Marrow \$_	<u>/00.00</u>						
Sherry Wester \$	100:00						
Galf White \$_	100.00						
Jaiden Bethany \$	50.00						
Shonal Conner	60.64						
	<u></u> ,						
	- 610 14						
Total of Expenditures (\$100 or less each payee)							
b. Itemized Expenditures (Over \$100 each payee this period)							
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.	b.)s <u>310</u> (64						
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 						
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12	2.c.)\$ <u>3.10 (47</u>						
22.IN-KIND CONTRIBUTIONS	B						
a. Unitemized in-kind contributions (\$100 or less from each source this period	od)\$						
b. Itemized in-kind contributions (over \$100 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.)\$						
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 sh	own i item 12.f.)\$						

OCT 112022

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE UNTY ELECTION COMMISSION

				The state of the s
1. NAME OF CANDIDATE OR COMMITTEE	10		2. REPORT COVER	THO MINESION 22
	Amount			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	500.00			
4. COMPLETE THE APPROPRIATE ITEMS FOR E		Contributions totaling more than a	100 IIU/II any contributor)	Amount of Contribution
Pirst Name Debre Crutcher	Middle Name		_ /	
Lasi Name/Organization Name	1	Primary Election	General Election	\$50.00
A 1 1 1		Runoff (Local Election		
Address 14/2 Anthrope Higher				A This Flories
City Lehamon	State Zip Code 7	Date of Contribution		Aggregate This Election
Occupation Reficed		July 29,	2022	
Employer				
First Name 1. A . A . A . A . A . A . A . A . A .	Middle Name	Contribution Received For:		Amount of Contribution
Linda Vantreeses		Primary Election	General Election	
Last Name/Organization Name				50.00
Address (2002) 413 (Ar	Hoce Hwy	Runoff (Local Election	ns Only)	
City All Charles Company	State Zip Code	Date of Contribution		Aggregate This Election
Occupation Refice		July 29	, 2022	
Employer	a mil	' '		
A /				
τ(
First Name	Middle Name	Contribution Received For:		Amount of Contribution
First Name Sharry Wester Last Name/Organization Name	Viddle Name		General Election	
Sharry Wester Last Name/Organization Name	Middle Name	Primary Election	General Election	Amount of Contribution
Last Name/Organization Name		☐ Primary Election ■ ☐ Runoff (Local Election	General Election	75.00
Sharry Wester Last Name/Organization Name		Primary Election	General Election	
Shary Wester Last Name/Organization Name Address Address Address		Primary Election	General Election	75.00
Shary Wester Last Name/Organization Name Address City Carthoge Occupation Reference		Primary Election	General Election	75.00
Shary Wester Last Name/Organization Name Address Address City Carthage		Primary Election	General Election	75.00 Aggregate This Election
Shary Wester Last Name/Organization Name Address Address City Carthage Occupation Employer I (Primary Election	General Election	75.00
Shary Wester Last Name/Organization Name Address Address City Carthogo Occupation Employer I (First Name Yushica Brooks	State Zip Code 37030	Primary Election Runoff (Local Election Date of Contribution Tuly Contribution Received For:	General Election	Aggregate This Election Amount of Contribution
Shary Wester Last Name/Organization Name Address Address City Carthage Occupation Employer I (State Zip Code 37030	Primary Election Runoff (Local Election Date of Contribution Tuly Contribution Received For:	General Election as Only) 3 0, 2022 General Election	75.00 Aggregate This Election
Shary Wester Last Name/Organization Name Address Address City Carthogo Occupation Employer I (First Name Yushica Brooks	State Zip Code 37030	Primary Election Runoff (Local Election Date of Contribution Tuly Contribution Received For: Primary Election Runoff (Local Election	General Election as Only) 3 0, 2022 General Election	Aggregate This Election Amount of Contribution
Shary Wester Last Name/Organization Name Address Address City Carthoge Occupation Employer I First Name Pashica Brooks Last Name/Organization Name	State Zip Code 37030	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election Date of Contribution	General Election as Only) General Election General Election as Only)	Aggregate This Election Amount of Contribution
City Carthoge Occupation Employer Last Name/Organization Name Address Ad	State Zip Code 37030 Middle Name	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election Date of Contribution	General Election as Only) General Election General Election as Only)	Aggregate This Election Amount of Contribution
Address Address City Carthage Occupation Employer I First Name Address Possoc Box 1614 City City Character City Carthage Occupation Address Address	State Zip Code 37030 Middle Name	Primary Election Runoff (Local Election Date of Contribution Tuly Contribution Received For: Primary Election Runoff (Local Election	General Election as Only) General Election General Election as Only)	Aggregate This Election Amount of Contribution
City Carthoge Occupation Employer Last Name/Organization Name Address Ad	State Zip Code 37030 Middle Name	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election Date of Contribution	General Election as Only) General Election General Election as Only)	Aggregate This Election Amount of Contribution
Address Address City Carthage Occupation Employer I First Name Address Possoc Box 1614 City City Character City Carthage Occupation Address Address	State Zip Code 37030 Middle Name State Zip Code 37088	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election Date of Contribution	General Election as Only) General Election General Election as Only)	Aggregate This Election Amount of Contribution

OCT 11 2022

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS CANDIDATE

1. NAME OF CANDIDATE OR COMM	COVERING THE PERIOD						
1. NAME OF CANDIDATE OR COMMI	Amount -						
3 TOTAL ITEMIZED IN-KIND CONTR	A						
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)							
First Name	Middle Name		In-Kind Contribution Received For: □ Primary Election □ 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	nployer						
First Name	Middle Nar	ne	In-Kind Contribution Received For: Primary Election 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	noloyer						
First Name	Middle Nar	ne	In-Kind Contribution Received For:	Value of In-Kind Contribution			
1	\		Primary Election General Election	on			
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	nployer						
First Name	Middle Nar	ne	In-Kind Contribution Received For: Primary Election 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 En	nployer						
First Name	Middle Nam	e \	In-Kind Contribution Received For: Primary Election General Election	Value of In-Kind Contribution on			
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	ployer						
(Carpy forward to item 3, of next page if addition	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.)						



WILSON COUNTY ITEMIZED STATEMENT OF EXPENDITURES CLOCAMEDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	var:		2. REPORT COVER FROM: 7-26-22			
Belita McMury	TO: 9-30-22					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	500,00					
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		Horned Yn Can	works 10	100.00		
Crutcher		Helped In CAN by Holding Sig				
Address 1413 /Arthocy HWY		Dy Holand Dig				
City & Davon	Stale Zip Code 7			Land of the second		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name		Helped In C by Holding S	Ranmian	H		
Last Name/Business Name		LU Halding 6	in ps of	100.00		
Address 113 NOCture Fores	t Ct	179 1100013	19117 4161	, 10		
N)ASKVILL	State Zip Code					
First Name Sherry	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name		Helped In (1) By Holdings	Angorian Sta	#100.00		
Address 6 Hill Top lane		py Holding	orgio erci			
City MAY HADE	State Zip Code 37030					
First Name Gale	Purpose of Expenditure	14000	Amount of Expenditure			
Last Name/Business Name		Helped In Co	10000			
Address Hunters Pain	109/15/101/	7.0				
City Lebanon,	State Zip Code 37087					
First Name	Middle Name	Purpose of Expenditure	2	Amount of Expenditure		
Last Name/Business Name	# 50,00					
150 Hany		11/2 Word	F 30800			
ddress Hamilton Station Apt S		By April 8 2. 2. 2. Level				
City Lebanon,	State Zip Code 37087					
First Name Shurk	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name		Budlo Write	#50 a00			
Address Hunters Pai	at	14 10 Ming -	5-1-10			
City L& havon,						
5. TOTAL ITEMIZED EXPENDITURES	W 37087					
(Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must	500:00					

ITEMIZED STATEMENT OF LOANS - CANDIDATE SON COUNTY

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD			
Belifa McMurif Fife 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any				FR 7	FROM: TO: 7-16-22 9-30-2		9-30-22	
3. COMPLETE THE APPROPRIATE ITEMS I	OR EACH ITEM	IZED LOAN	(loans totaling n	nore than \$100	from any source	e during the per	iod)	
Complete the Following for the Source of the Loan				*				
First Name Middle Nar	ne	Outstanding (Beginning	Loan Balance of Period)	Loans Receive		oan yments		anding Loan Balance End of Period)
Last Name/Organization Name				/				
Address		Loan Receiv		General	Election	Date of Loai	y .	
City	Zip Code		(Local Elections	Only)		\triangle	_	
List All Endor	rsers or Guarantors	for Above Loa	n (If more spa	ce is needed	i please attach	a page)		
First Name	Middle Name		First Name				Middle N	lame
Last Name/Organization Name			Last Name/Org	janization Nam	ne 			
Address			Address					
City	State Zip	Code	City				State	Zip Code
Amount Guaranteed Outstanding	X		Amount Guara	nteed Outstand	ding			
First Name	Middle Name		First Name				Middle N	lame
Last Name/Organization Name			Last Name/Org	anization Nam	ne			
Address			Address			8.		1
City	State Zip (Code	City				State	Zip Code
Amount Guaranteed Outstanding			Amount Guerar	nteed Outstand	ling			
First Name	Middle Name		First Name				Middle I	Name
Last Name/Organization Name			Last Name/Org	anizatio Nam	ne			
Address			Address					
City	State Zip C	Code	City				State	Zip Code
Amount Guaranteed Outstanding			Amount Guarar	iteed Outstand	ling			
First Name	Middle Name		First Name)	Middle N	lame
Last Name/Organization Name		Last Name/Organization Name						
Address			Address		/			
City	State Zip C	Code	City	/			State	Zip Code
Amount Guaranteed Outstanding			Amount Guaran	teed Outstand	iṇg			········
4. Totals for all Loans (complete on last page of (Total loans received should also be shown in item 16. on s (Total loan payments should also be shown in item 20. on s (Total outstanding loan balance should also be shown in item	ummary page.) ummary page.)		Outstanding Lo (Beginning o		Loans Received	Loar Payme		Outstanding Loan Balance (End of Period)
SS-1132 (Rev. 4/02)				Pa	age	of		RDA 1159



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE OUNTY

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
1. NAME OF CANDIDATE OR COMMITTEE		FROM: 7-26-	22 TO: 9	-30-22		
COMPLETE THE APPROPRIATE ITEMS F OBLIGATION (obligations totaling more than	OR EACH ITEMIZED a \$100 owed to any	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
person/vendor at the end of the reporting p		ei — — — — — — — — — — — — — — — — — — —			у — W // — 21. У — 20 €	
First Name	Middle Name					
Last Name/Business Name						
Address		1	-	1-1-		
City	State Zip Code					
Description of Obligation		-				
First Name	Middle Name		9			
Last Name/Business Name	<u> </u>					
Last Wallier Dualities Name	/					
Address		1	-71)		
City	State Zip Code					
Description of Obligation						
	Middle Name		IIIV System - III		F E STATE	
First Name	Middle Marile					
Last Name/Business Name						
Address			($\langle \rangle$	(
City	State Zip Code					
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name					1	
Address			()	/)	7)	
City	State Zio Code					
Description of Obligation						
Description of Obligation			and the state of			
First Name	Middle Name	•	C 20			
Last Name/Business Name						
Address			\longrightarrow	1		
City	State Zip Code					
Description of Obligation				//		
4. TOTALS (Total from Outstanding Balance - (End of Period) co	olumn must also be shown	()	()	1	7)1	
in item 23b. on summary page.)						