CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

		-	141446						
1. DATE OF REPORT	! :	2.a. NAMEOFC Jerru	andidateor Becker			···			
2.b. IF COMMITTEE, NAME OF	CANDIDATE	- 0919	nuce		Ta Election D				
Z.O. II OOMINITTEE, ITALE OF	CANDIDATE	-			3. ELECTION D				
					270	2022			
4.a. CAMPAIGN ADDRESS AND Street or Rural Route		City		State	Zip Code	Phone			
102 General Smith	IPl. Hen	decsonville		TH	37075	(15-594-3544			
4.b. CANDIDATE'S HOME ADDI Street or Rural Route	RESS (if different t	han 4.a.) City		State	Zip Code	Phone			
5. OFFICE SOUGHT (include of	district number, if a	pplicable)	6. NAME	OF POLITICAL 1	TREASURER (ma	v be candidate)			
County Commission	mer Dist	તાલ ગ્રા	01 1	aniu C.	Tighe	, •• •• •• • •			
7. CATEGORY OR REPORT (C			19 19 L	<u> </u>	<u>ngno</u>	<i>,</i>			
FIRST SECOND QUARTER QUARTER	THRD	FOURTH	PRE-	PRE-	MID-YEAR	· — - · • • · •			
8.a. BEGINNING DATE OF REPOR	QUARTER TING PERIOD	QUARTER	PRIMARY 8 b ENDING	GENERAL G DATE OF REPO	SUPPLEMENT RTING PERIOD	TAL SUPPLEMENTAL			
7/1/21			O.D. ENDIN	1115/2	2				
9. (Check one)			· · · · · · · · · · · · · · · · · · ·	11010					
a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)									
b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.									
and/or experiordices (otal more than \$1,	000 for this report	ing period.						
I/we do solemnly swear or accurate accounting of cam Financial Disclosure Act. A benefit of the candidate or factorial benefit of the candidate Signature of capdidate	ipaign contribution: .dditionally, I/we sw	s and expenditure: vear or affirm that	s required to b no campaign (e reported by the contributions hav	e candidate comm e been expended	titee by the Campaign for the personal financial			
11 WITNESS SIGNATURE		_							
()/(5:1		1 /- /		12	, ,	1.1. 1.			
Jan Jague		1/24/22	· · · · · ·	Me	2 tie	1/2U/Ja			
signature of witness		/ date		signati	ure of witness	date			
12. SUMMARY						1 - 1			
		FILE!	D PM		11.32 0	•			
a. BALANCE ON HAND LA	ST REPORT	****			s 1632.00	<u>) </u>			
b. TOTAL RECEIPTS THIS P	ÆRIOD	JAN 25	2022		s				
c. TOTAL DISBURSEMENTS	STHIS PERIOD	SUMNER CO ELECTION COM	YTNUC MOISSIMI		s 139.0°	<u>5</u>			
d. BALANCE ON HAND (1	2.a. plus 12.b. min	us 12.c.)	***************************************	·····		s 1492.95			
e. TOTAL LOANS OUTSTAI	NDING					sØ			
				·		d			
f. TOTAL OBLIGATIONS OF	JTSTANDING		***************************************			\$			



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT CO	14. REPORT COVERING THE PERIOD			
Derry Becker	FROM:7 2	TO: 1/15/22			
RECEIPTS' 15. CONTRIBUTIONS (other than loans and interest)	·	•			
a. Unitemized Contributions (\$100 or less from each source this period)	\$				
b. Itemized Contributions (over \$100 from each source this period)					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$				
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.)	\$				
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	e, gasoline)			
					
\$					
\$					
\$					
\$					
 \$	<u> </u>				
Total of Former diturns (\$400)					
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.)					
20. LOAN REPAYMENTS MADE THIS PERIOD					
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		\$ 139.W			
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.)\$					
23. OBLIGATIONS		ļ			
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 iter	m 12.f.)	\$ ()			



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE TECT 4 Becker	2. REPORT COVER	RING THE PERIOD							
,	Amount								
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 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/	ast Name/Bysigess Name		- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		4 139.05				
Address C		Donain Rene a Hosting							
Address General Smith Place			1 a Hosting	13 1.00					
Hendersonville	State	Zip Code 37075							
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name	Last Name/Business Name								
Address		_							
City	State	Zip Code	_		•				
	Olate	Lipode							
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name	····	-							
Address		_							
City	Ctata	7:- 0- 4:	_						
Oily	State	Zip Code							
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name	··. <u>.</u>								
Address		†							
City	State	Zip Code	-						
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name			7						
Address	·	†							
City	State	Zip Code	1						
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 of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.) 					£139.05				

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