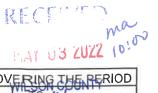
CAMPAIGN FINANCIAL DISCLOSURE STATEM

For State and Local Candidates

For Single-Candidate Committees 2.a. NAME OF CANDIDATE OR COMMITTEE DATE OF REPORT WILSON COUNTY **ELECTION COMMIS** 3. ELECTION DATE 2.b. IF COMMITTEE, NAME OF CANDIDATE 2022 4.a. CAMPAIGN ADDRESS AND PHONE State Zip Code Phone Street or Rural Route City 37087 615-262-1134 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Zip Code State Phone NAME OF POLITICAL TREASURER (may be candidate) OFFICE SOUGHT (include district number, if applicable) District CATEGORY OR REPORT (Check one) PRE-MID-YEAR YEAR-END FIRST SECOND THIRD **FOURTH GENERAL** SUPPLEMENTAL SUPPLEMENTAL QUARTER PRIMARY QUARTER QUARTER QUARTER 8.b. ENDING DATE OF REPORTING PERIOD 8.a. BEGINNING DATE OF REPORTING PERIOD 4-23-22 4-1-22 9. (Check one) 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. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. signature of candidate WITNESS SIGNATURE signature of witness signature of witness 12. SUMMARY BALANCE ON HAND LAST REPORT\$ 1587 TOTAL RECEIPTS THIS PERIOD\$ = TOTAL DISBURSEMENTS THIS PERIOD\$ d. TOTAL LOANS OUTSTANDING\$



SUMMARY PAGE - CANDIDATE



13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE RERIOD							
Harold Glenn Dentin	FROM: 4 / I ELECTION COMMISSION							
RECEIPTS								
15. CONTRIBUTIONS (other than loans and interest)	6							
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	λ Ι							
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, gasoline)							
Magnetic Signs (Promotions) \$ 67 1	?							
Vard Signs (Promotions) \$ 389 9								
\$								
\$								
· · · · · · · · · · · · · · · · · · ·	_							
								
\$								
Total of Expenditures (\$100 or less each payee)	\$ 667 =							
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 389 97							
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 457 0 5							
20. LOAN REPAYMENTS MADE THIS PERIOD								
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 457 %							
22.IN-KIND CONTRIBUTIONS								
Light in hind contributions (\$100 or loss 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 shown i iten	n 12.f.)\$							



MAY 03 2022 MAY 03 2022 MAY 03 2022 MAY 03 2022 MAY 03 2022

1. NAME OF CANDIDATE OR COMMITTEE	TO: 4/23 / 22						
Harold Glenn De	Amount 23 / 22						
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	11.5						
4. COMPLETE THE APPROPRIATE ITEMS FOR EA							
First Name	Middle Nam	ne	Contribution Received For:	Amount of Contribution			
Last Name/Organization Name			Primary Election				
Address			Runoff (Local Election	s Only)	Aggregate This Election		
City	State Zip Code			Date of Contribution			
Occupation							
Employer							
First Name	Middle Nam	ne	Contribution Received For	:	Amount of Contribution		
Last Name/Organization Name			Primary Election				
Address			Runoff (Local Election	ns Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election		
Occupation							
Employer							
First Name Middle Name			Contribution Received For	:	Amount of Contribution		
Last Name/Organization Name			Primary Election	General Election			
Address			Runoff (Local Election	ns Only)			
City	State Zip Code		Date of Contribution	Aggregate This Election			
Occupation			1				
Employer							
First Name	First Name Middle Name		Contribution Received For:		Amount of Contribution		
Last Name/Organization Name			Primary Election	General Election			
Address			Runoff (Local Election	ns Only)			
City	State	Zip Code	Date of Contribution	Aggregate This Election			
Occupation							
Employer							
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages (If this is the last page of contributions, this amount must			None				





ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS WIGANDIDATE

ELECTION COMMISSION 2. REPORT COVERING THE PERIOD 1. NAME OF CANDIDATE OR COMMITTEE FROM: TO: Amount 3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period) In-Kind Contribution Received For: Value of In-Kind Contribution Middle Name First Name ☐ Primary Election ☐ General Election Last Name/Organization Name Runoff (Local Elections Only) Aggregate this Election Date of In-Kind Contribution Address Description of In-Kind Contribution State Zip Code City Employer Occupation Value of In-Kind Contribution In-Kind Contribution Received For: Middle Name First Name ☐ Primary Election ☐ General Election Last Name/Organization Name Runoff (Local Elections Only) Aggregate this Election Date of In-Kind Contribution Address Description of In-Kind Contribution Zip Code State City Employer Occupation Value of In-Kind Contribution In-Kind Contribution Received For: Middle Name First Name Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Date of In-Kind Contribution Aggregate this Election Address Description of In-Kind Contribution Zip Code State City Employer Occupation In-Kind Contribution Received For: Value of In-Kind Contribution Middle Name First Name ☐ Primary Election ☐ General Election Last Name/Organization Name Runoff (Local Elections Only) Aggregate this Election Date of In-Kind Contribution Address Description of In-Kind Contribution Zip Code State City Employer Occupation Value of In-Kind Contribution In-Kind Contribution Received For: Middle Name First Name Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Date of In-Kind Contribution Aggregate this Election Address Description of In-Kind Contribution Zip Code State City Occupation Employer 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.)



MAY 03 2022

CANDIDATE

ELECTION COMMISSION

ITEMIZED STATEMENT OF EXPENDITURES -

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVE	RING THE PERIOD		
Harold Glenn De	FROM: 4/	TO: 4/23					
	ge)	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 Magnets on the Cheap Last Name/Business Name	Middle Na	me	Purpose of Expenditure Magnetic Sign	jns-2	Amount of Expenditure		
Magnets on the Change							
Address A Stone hollow Dr	2 (00						
CityAuskin	State	Zip Code					
First Name Sign in the Cheap	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure 389 96		
Last Name/Business Name			Yard signs.	. 30	381 -		
Address	-		-				
City Property 10 W Pr	State	Zip Code	1				
Austin,	Texas	78758					
First Name					Amount of Expenditure		
Last Name/Business Name]				
Address							
City	State	Zip Code					
First Name Middle Name			Purpose of Expenditure	the second	Amount of Expenditure		
Last Name/Business Name							
Address							
City State Zip Code							
First Name	First Name Middle Name				Amount of Expenditure		
Łast Name/Business Name							
Address							
City	State	Zip Code					
First Name Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name							
Address							
City	State	Zip Code					
5. 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	457 06						



ITEMIZED STATEMENT OF LOANS - CANDIDATE OF LOANS -

NAME OF CANDIDATE OR COMMITTEE							2. REPORT COVERING THE PERIOD FROM: TO:				
2. COMPLETE THE AD	DOODDIATE ITEMS	EOD EACH	ITEMAN:	7ED I OAN	# t-t-E	II 84	00.5		!!\		
3. COMPLETE THE AP			I I EIVII Z	ZED LOAN	(loans totaling i	nore than \$1	ou from any source	e auring the p	erioa)		
Complete the Following for				Outstanding	Loop Palence	Loon		Loop	T Out	tst and ing Loan Balance	
First Name	e Middle Name				g Loan Balance Loans ng of Period) Received					(End of Period)	
Last Name/Organization Name											
Address L				Loan Receiv	ceived For: Date of Loan						
City	State	Zip Code			☐ Primary Election ☐ General Election						
	Liet All End	orears or Guar	antore fo		(Local Elections		ad please attac	h a nage)			
First Name	LIST All LITT	Middle Nam		OI ABOVE LOC	pan (If more space is needed please attach a page) First Name Middle Name						
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
		10	7: 0	. 1.					01-4-	7.0.1	
City		State	Zip Co	ode	City				State	Zip Code	
Amount Guaranteed Outstanding	9				Amount Guaranteed Outstanding						
First Name	First Name Middle Name				First Name Middle Name					Name	
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City	State Zip Coo			ode	City					Zip Code	
Amount Guaranteed Outstanding	1				Amount Guarar	nteed Outstar	nding				
First Name	First Name Middle Name				First Name Middle Name					e Name	
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City		State	Zip Co	ode	City					Zip Code	
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding						
First Name	irst Name Middle Name				First Name Middle Name					Name	
Last Name/Organization Name				Last Name/Organization Name							
Address				Address							
City		State	Zip Co	de	City				State	Zip Code	
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding						
Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.)					Outstanding Lo (Beginning o		Loans Received	Loa Paym		Outstanding Loan Balance (End of Period)	
(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.)											



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE WAS OUNTY 10.

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
Harold Glenn De		FROM: 4/	TO:	4/23		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$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	Middle Na	ma				
	IVII dale i va	me				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Na	me				
Last Name/Business Name			-			
Address			-			
City	State	Zip Code	-			
Description of Obligation			d			
	Middle Na		9	TPE		
First Name	IVIIQUIE IVAI	ne				
Last Name/Business Name ,						
Address						
City	State	Zip Code				
Description of Obligation			- V. =			
First Name	Middle Nar	me				
Last Name/Business Name			7 1			
Address			1			
City	State	Zip Code	7			
Description of Obligation						
First Name	Middle Nar	ne				
Last Name/Business Name			7			
Address			1			
City	State Zip Code					
Description of Obligation						
4. TOTALS						
(Total from Outstanding Balance - (End of Period) c in item 23b. on summary page.)	olumn mus	t also be shown				0