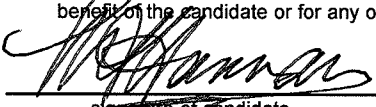
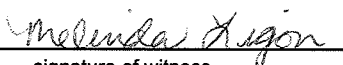
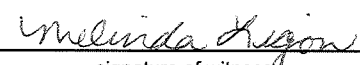


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 10-14-22		2.a. NAME OF CANDIDATE OR COMMITTEE MICHAEL HANNAN	
2.b. IF COMMITTEE, NAME OF CANDIDATE BOX 6311		3. ELECTION DATE 2022-08-04	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route BOX 6311 City K'PORT State TN Zip Code 37663 Phone			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route 3911 INWOOD DR City K'PORT State TN Zip Code 37664 Phone —			
5. OFFICE SOUGHT (include district number, if applicable) COUNTY COMMISSION		6. NAME OF POLITICAL TREASURER (may be candidate) JUDY HANNAN	
7. CATEGORY OR REPORT (Check one) ☐ FIRST QUARTER ☐ SECOND QUARTER ☒ THIRD QUARTER ☐ FOURTH QUARTER ☐ PRE-PRIMARY ☐ PRE-GENERAL ☐ MID-YEAR SUPPLEMENTAL ☐ YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD 2022-07-26		8.b. ENDING DATE OF REPORTING PERIOD 2022-09-30	
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.			
10. 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 10-14-22 date  signature of political treasurer 10-14-22 date			
11. WITNESS SIGNATURE  signature of witness 10-14-22 date  signature of witness 10-14-22 date			
12. SUMMARY a. BALANCE ON HAND LAST REPORT \$ 69.46 b. TOTAL RECEIPTS THIS PERIOD \$ 0 c. TOTAL DISBURSEMENTS THIS PERIOD \$ 69.46 d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ 0 e. TOTAL LOANS OUTSTANDING \$ 0 f. TOTAL OBLIGATIONS OUTSTANDING \$ 0			



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE MICHAEL HANNAN				2. REPORT COVERING THE PERIOD FROM: TO:			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name MICHAEL		Middle Name F.		Outstanding Loan Balance (Beginning of Period) 5000		Loans Received 0	
Last Name/Organization Name CITIZENS FOR HANNAN				Loan Payments 69.46		Outstanding Loan Balance (End of Period) 4930.54	
Address 63911 TAYLOR P.O. BOX				Loan Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		Date of Loan	
City K'PORT		State IN		Zip Code 4663			
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)							
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		City		State	
		Zip Code				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		City		State	
		Zip Code				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		City		State	
		Zip Code				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		City		State	
		Zip Code				Zip Code	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) (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.)				Outstanding Loan Balance (Beginning of Period)		Loans Received	
						Loan Payments	
						Outstanding Loan Balance (End of Period)	

