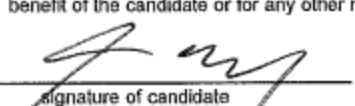
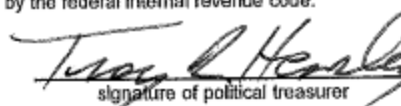
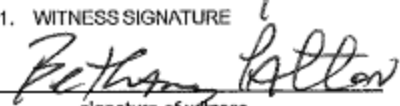
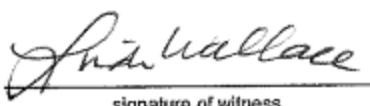
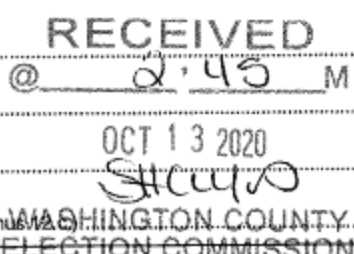


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>10-13-20</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Aaron T. Murphy</u>																			
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>11-3-20</u>																			
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>308 Shawnee Dr. Johnson City TN. 37604 915-6178</u>																					
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone																					
5. OFFICE SOUGHT (include district number, if applicable) <u>Board of Commissioners</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Troy R. Hensley</u>																			
7. CATEGORY OF 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 <u>7-20-20</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>9-30-20</u>																			
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 <u>10/13/2020</u> date  signature of political treasurer <u>10-13-20</u> date																					
11. WITNESS SIGNATURE  signature of witness <u>10-13-20</u> date  signature of witness <u>10-13-20</u> date																					
12. SUMMARY  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">a. BALANCE ON HAND LAST REPORT</td> <td style="width: 10%;">\$</td> <td style="width: 30%; text-align: right;">0</td> </tr> <tr> <td>b. TOTAL RECEIPTS THIS PERIOD</td> <td>\$</td> <td style="text-align: right;">15,624.⁰⁰</td> </tr> <tr> <td>c. TOTAL DISBURSEMENTS THIS PERIOD</td> <td>\$</td> <td style="text-align: right;">11,490.79</td> </tr> <tr> <td>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)</td> <td>\$</td> <td style="text-align: right;">4,133.21</td> </tr> <tr> <td>e. TOTAL LOANS OUTSTANDING</td> <td>\$</td> <td></td> </tr> <tr> <td>f. TOTAL OBLIGATIONS OUTSTANDING</td> <td>\$</td> <td></td> </tr> </table>				a. BALANCE ON HAND LAST REPORT	\$	0	b. TOTAL RECEIPTS THIS PERIOD	\$	15,624. ⁰⁰	c. TOTAL DISBURSEMENTS THIS PERIOD	\$	11,490.79	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$	4,133.21	e. TOTAL LOANS OUTSTANDING	\$		f. TOTAL OBLIGATIONS OUTSTANDING	\$	
a. BALANCE ON HAND LAST REPORT	\$	0																			
b. TOTAL RECEIPTS THIS PERIOD	\$	15,624. ⁰⁰																			
c. TOTAL DISBURSEMENTS THIS PERIOD	\$	11,490.79																			
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$	4,133.21																			
e. TOTAL LOANS OUTSTANDING	\$																				
f. TOTAL OBLIGATIONS OUTSTANDING	\$																				



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Arnon T. Murphy</u>	14. REPORT COVERING THE PERIOD FROM: <u>7-20</u> TO: <u>9-30</u>
---	---

RECEIPTS
 15. CONTRIBUTIONS (other than loans and interest)

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 959⁰⁰
- b. Itemized Contributions (over \$100 from each source this period) \$ 14,665⁰⁰
- c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 15,624⁰⁰

 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.) \$ 15,624⁰⁰

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)

<u>Advice Giving</u>	\$	<u>212.05</u>
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
- Total of Expenditures (\$100 or less each payee) \$ 212.05
- b. Itemized Expenditures (Over \$100 each payee this period) \$ 11,278.74
- c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 11,490.79

 20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____
 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 11,490.79

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

- 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 in item 12.f.) \$ _____



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Aaron T. Murphy</i>				2. REPORT COVERING THE PERIOD FROM: <i>7-20</i> TO: <i>9-30</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Thomas</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Graham</i>				☐ Primary Election ☒ General Election	
Address <i>1022 Somerset Dr.</i>				☐ Runoff (Local Elections Only)	
City <i>Johnson City</i>	State <i>TN</i>	Zip Code <i>37604</i>	Date of Contribution <i>7-20-20</i>		Amount of Contribution <i>100.00</i>
Occupation <i>Retired</i>					Aggregate This Election
Employer					
First Name <i>Mark</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Sinclair</i>				☐ Primary Election ☒ General Election	
Address <i>809 Lehigh St.</i>				☐ Runoff (Local Elections Only)	
City <i>Johnson City</i>	State <i>TN</i>	Zip Code <i>37604</i>	Date of Contribution <i>7-24-20</i>		Amount of Contribution <i>200.00</i>
Occupation <i>Retired</i>					Aggregate This Election
Employer					
First Name <i>Eric</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Herrin</i>				☐ Primary Election ☒ General Election	
Address <i>806 N. Mountainview Cir</i>				☐ Runoff (Local Elections Only)	
City <i>Johnson City</i>	State <i>TN</i>	Zip Code <i>37604</i>	Date of Contribution <i>7-26-20</i>		Amount of Contribution <i>100.00</i>
Occupation <i>Attorney</i>					Aggregate This Election
Employer <i>Herrin + McPeak Atty</i>					
First Name <i>Larry</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Tarter</i>				☐ Primary Election ☒ General Election	
Address <i>1101 Beechwood Dr.</i>				☐ Runoff (Local Elections Only)	
City <i>Johnson City</i>	State <i>TN</i>	Zip Code <i>37604</i>	Date of Contribution <i>8-20-20</i>		Amount of Contribution <i>100.00</i>
Occupation <i>Retired</i>					Aggregate This Election
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to Item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in Item 15b. of summary.)					<i>500.00</i>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING THE PERIOD	
Aaron T. Murphy		FROM: 7-20	TO: 9-30
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount 500 ⁰⁰	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name	Melvin	Middle Name	
Last Name/Organization Name	Miller	Contribution Received For:	Amount of Contribution
Address	2786 Watauga Rd.	☐ Primary Election ☒ General Election	200 ⁰⁰
City	Johnson City TN 37601	☐ Runoff (Local Elections Only)	
Occupation	Retired	Date of Contribution	Aggregate This Election
Employer		8-19-20	
First Name	Peggy	Middle Name	
Last Name/Organization Name	Carmwell	Contribution Received For:	Amount of Contribution
Address	918 Handson Dr.	☐ Primary Election ☒ General Election	100 ⁰⁰
City	Johnson City TN 37601	☐ Runoff (Local Elections Only)	
Occupation	Retired	Date of Contribution	Aggregate This Election
Employer		8-19-20	
First Name	Robert	Middle Name	
Last Name/Organization Name	Heston	Contribution Received For:	Amount of Contribution
Address	708 Fernside Rd	☐ Primary Election ☒ General Election	500 ⁰⁰
City	Johnson City TN 37604	☐ Runoff (Local Elections Only)	
Occupation	Retired	Date of Contribution	Aggregate This Election
Employer		8-24-20	
First Name	GARY	Middle Name	
Last Name/Organization Name	Shipley	Contribution Received For:	Amount of Contribution
Address	125 Stafford Lane	☐ Primary Election ☒ General Election	1000 ⁰⁰
City	Gray TN 37615	☐ Runoff (Local Elections Only)	
Occupation	Sales	Date of Contribution	Aggregate This Election
Employer	B.I.S.	8-26-20	
5. TOTAL ITEMIZED CONTRIBUTIONS			2300 ⁰⁰
(Carry forward to Item 3. of next page if additional pages of this form are used.)			
(If this is the last page of contributions, this amount must be shown in item 15b. of summary.)			



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: <u>Aaron T. Murphy</u>		2. REPORT COVERING THE PERIOD FROM: <u>7-20</u> TO: <u>9-30</u>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount: <u>2300⁰⁰</u>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name: <u>James</u>	Middle Name:	Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)	Amount of Contribution: <u>1600⁰⁰</u>
Last Name/Organization Name: <u>Perdue</u>			
Address: <u>2121 S. Greenwood Dr.</u>			
City: <u>Johnson City</u>	State: <u>TN.</u> Zip Code: <u>37604</u>	Date of Contribution: <u>8-28-20</u>	Aggregate This Election:
Occupation: <u>MANAGER</u>			
Employer: <u>Lafayette Trust</u>			
First Name: <u>Shorena</u>	Middle Name:	Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)	Amount of Contribution: <u>1600⁰⁰</u>
Last Name/Organization Name: <u>Walker</u>			
Address: <u>440 HANNAH Cir SE</u>			
City: <u>Christiansburg</u>	State: <u>VA</u> Zip Code: <u>24073</u>	Date of Contribution: <u>8-28-20</u>	Aggregate This Election:
Occupation: <u>Retired</u>			
Employer:			
First Name: <u>Christopher</u>	Middle Name:	Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)	Amount of Contribution: <u>1600⁰⁰</u>
Last Name/Organization Name: <u>Fontana</u>			
Address: <u>521 Laurel Ave</u>			
City: <u>Johnson City</u>	State: <u>TN.</u> Zip Code: <u>37604</u>	Date of Contribution: <u>8-28-20</u>	Aggregate This Election:
Occupation: <u>Retired</u>			
Employer:			
First Name: <u>Phillip</u>	Middle Name:	Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)	Amount of Contribution: <u>100⁰⁰</u>
Last Name/Organization Name: <u>Cariger</u>			
Address: <u>6 Fox Run Lane</u>			
City: <u>Johnson City</u>	State: <u>TN.</u> Zip Code: <u>37604</u>	Date of Contribution: <u>8-31-20</u>	Aggregate This Election:
Occupation: <u>Retired</u>			
Employer:			
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to Item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in Item 5b. of summary.)			<u>7200⁰⁰</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING THE PERIOD	
Aaron T. Murphy		FROM: 7-20	TO: 9-30
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 7200 ⁰⁰
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Denise		☐ Primary Election ☒ General Election	1600 ⁰⁰
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Folster			
Address		Date of Contribution	Aggregate This Election
120 Mosley Hollow Rd		8-28-20	
City	State	Zip Code	
Johnson City	TN	37602	
Occupation			
Book Keeper			
Employer			
Lawler Properties			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Carol		☐ Primary Election ☒ General Election	1600 ⁰⁰
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Lawler			
Address		Date of Contribution	Aggregate This Election
11 Fox Run Lane		8-28-20	
City	State	Zip Code	
Johnson City	TN	37604	
Occupation			
Retired			
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Jandy		☐ Primary Election ☒ General Election	100 ⁰⁰
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Babel			
Address		Date of Contribution	Aggregate This Election
304 Shawnee Rd		9-7-20	
City	State	Zip Code	
Johnson City	TN	37604	
Occupation			
Teacher			
Employer			
S.H.H.S.			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Vincent		☐ Primary Election ☒ General Election	100 ⁰⁰
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Dial			
Address		Date of Contribution	Aggregate This Election
2409 Stewart St.		9-9-20	
City	State	Zip Code	
Johnson City	TN	37601	
Occupation			
Minister			
Employer			
Bethel Christian Church			
5. TOTAL ITEMIZED CONTRIBUTIONS			10,600
(Carry forward to Item 3. of next page if additional pages of this form are used.)			
(If this is the last page of contributions, this amount must be shown in Item 15b. of summary.)			



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING THE PERIOD	
Aaron T. Murphy		FROM: 7-20	TO: 9-30
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount: 10,600
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Henry		☐ Primary Election ☒ General Election	500 ⁰⁰
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
CARR, JR.			
Address		Date of Contribution	Aggregate This Election
3326 Bondwood Cir		9-10-20	
City	State	Zip Code	
Johnson City	TN	37604	
Occupation			
Senior V.P.			
Employer			
Realty Trust Group			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Timothy		☐ Primary Election ☒ General Election	400 ⁰⁰
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Phillips			
Address		Date of Contribution	Aggregate This Election
1817 Waters Edge Dr.		9-14-20	
City	State	Zip Code	
Johnson City	TN	37604	
Occupation			
Retired			
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Lee		☐ Primary Election ☒ General Election	100 ⁰⁰
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Carter			
Address		Date of Contribution	Aggregate This Election
25 Mia Gracie Ct		9-11-20	
City	State	Zip Code	
Johnson City	TN	37615	
Occupation			
Retired			
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
David		☐ Primary Election ☒ General Election	500 ⁰⁰
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Wood			
Address		Date of Contribution	Aggregate This Election
179 Glass Rd		8-11-20	
City	State	Zip Code	
Johnson City	TN	37615	
Occupation			
Doctor			
Employer			
Ballad Health			
5. TOTAL ITEMIZED CONTRIBUTIONS			12,100 ⁰⁰
(Carry forward to Item 3. of next page if additional pages of this form are used.)			
(If this is the last page of contributions, this amount must be shown in Item 15b. of summary.)			



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>ARON T. MURPHY</i>		2. REPORT COVERING THE PERIOD FROM: <i>7-20</i> TO: <i>9-30</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>12,100</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name <i>SUSAN</i>	Middle Name	Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)	Amount of Contribution <i>1,000⁰⁰</i>
Last Name/Organization Name <i>SORRELL</i>			
Address <i>357 N. Pickens Bridge Rd</i>			
City <i>Piney Flats</i>	State <i>TN</i>	Date of Contribution <i>9-10-20</i>	Aggregate This Election
Occupation <i>CEO</i>	Zip Code <i>37686</i>		
Employer <i>NFI Consumer Products, Inc</i>			
First Name <i>Chad</i>	Middle Name	Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)	Amount of Contribution <i>1,000⁰⁰</i>
Last Name/Organization Name <i>SORRELL</i>			
Address <i>357 N. Pickens Bridge Rd</i>			
City <i>Piney Flats</i>	State <i>TN</i>	Date of Contribution <i>9-10-20</i>	Aggregate This Election
Occupation <i>Retired</i>	Zip Code <i>37686</i>		
Employer			
First Name <i>William</i>	Middle Name	Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)	Amount of Contribution <i>100⁰⁰</i>
Last Name/Organization Name <i>Messerschmidt</i>			
Address <i>2612 Grand Oaks Dr</i>			
City <i>Johnson City</i>	State <i>TN</i>	Date of Contribution <i>9-20-20</i>	Aggregate This Election
Occupation <i>Doctor</i>	Zip Code <i>37615</i>		
Employer <i>BARNAD HEALTH</i>			
First Name <i>Patricia</i>	Middle Name	Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)	Amount of Contribution <i>100⁰⁰</i>
Last Name/Organization Name <i>Horton</i>			
Address <i>3701 Edgewood Dr</i>			
City <i>Johnson City</i>	State <i>TN</i>	Date of Contribution <i>9-23-20</i>	Aggregate This Election
Occupation <i>Retired</i>	Zip Code <i>37601</i>		
Employer			
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to Item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in Item 15b. of summary.)			<i>14,300</i>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING THE PERIOD	
Aaron T. Murphy		FROM: 7-20	TO: 9-30
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 14,300
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Robert		☐ Primary Election ☒ General Election	365 ⁰⁰
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Love			
Address		Date of Contribution	Aggregate This Election
123 Laurel Ridge Dr.		9-23-20	
City	State	Zip Code	
Tombolough	TN	37659	
Occupation			
Physician Asst			
Employer			
Ballad Health			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
		☐ Primary Election ☐ General Election	
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Address		Date of Contribution	Aggregate This Election
City	State	Zip Code	
Occupation			
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
		☐ Primary Election ☐ General Election	
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Address		Date of Contribution	Aggregate This Election
City	State	Zip Code	
Occupation			
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
		☐ Primary Election ☐ General Election	
Last Name/Organization Name		☐ Runoff (Local Elections Only)	
Address		Date of Contribution	Aggregate This Election
City	State	Zip Code	
Occupation			
Employer			
5. TOTAL ITEMIZED CONTRIBUTIONS			14,665
(Carry forward to Item 3. of next page if additional pages of this form are used.)			
(If this is the last page of contributions, this amount must be shown in Item 15b. of summary.)			



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				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)					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
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.)					



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Aaron T. Murphy</i>		2. REPORT COVERING THE PERIOD FROM: TO:	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount <i>0</i>	
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 <i>Foster Signs</i>		<i>Advertising</i>	<i>4002.39</i>
Address <i>146 N. Linden Ave</i>			
City <i>Jonesborough</i>	State <i>TN</i> Zip Code <i>37659</i>		
First Name <i>Wesley</i>	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Vista Print</i>		<i>Advertising</i>	<i>624.54</i>
Address <i>Vista print.com</i>			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Mail Works</i>		<i>printing</i>	<i>6111.15</i>
Address <i>320 Wesley St</i>			
City <i>Johnson City</i>	State <i>TN</i> Zip Code <i>37601</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Tractor Supply</i>		<i>Advertising</i>	<i>175.66</i>
Address <i>4534 Bristol Hwy</i>			
City <i>Johnson City</i>	State <i>TN</i> Zip Code <i>37601</i>		
First Name <i>Micha</i>	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Taylor</i>		<i>Advertising</i>	<i>365.00</i>
Address <i>410 Pine Ridge Dr.</i>			
City <i>Alex</i>	State <i>TN</i> Zip Code <i>37616</i>		
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 of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			<i>11,278.74</i>



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				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		Middle Name		Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
Last Name/Organization Name							
Address				Loan Received For:		Date of Loan	
City				☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)			
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)				Outstanding Loan Balance (Beginning of Period)		Outstanding Loan Balance (End of Period)	
(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.)				Loans Received		Loan Payments	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
				FROM:		TO:	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							

