



COMMISSION

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1.	DATE OF REPORT	2.a. NAMEOFO	CANDIDATE OR	COMMITTEE							
2.b.	IF COMMITTEE, NAME OF CANDIDATE	1 DIONAGE	3 / 100 /		3. ELECTION	DATE					
	CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code		Phone				
	706 CAPE YORK CT.	Mr. JULIET	1)	111	37122	(41)	773-2815				
	CANDIDATE'S HOME ADDRESS (if differen Streel or Rural Route	it than 4.a.) City		State	Zip Code	F	Phone				
C	OFFICE SOUGHT (include district number, i ITY COMMISSIDEMED DISTUI			OF POLITICAL A MOSSS	TREASURER (m	ay be cand	didate)				
(CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE-PRIMARY	PRE- GENERAL	MID-YEA SUPPLEME		YEAR-END UPPLEMENTAL				
8.a. B	BEGINNING DATE OF REPORTING PERIOD		A STATE OF THE PROPERTY OF THE PARTY OF THE	DATE OF REPO	RTING PERIOD						
9 (Ch	10-24-10		-	15-11	- 60						
a	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.											
11. W	/ITMESS SIGNATURE										
A	signature of witness	1/25/11 date	_	signat	ure of witness		date				
12. SU	JMMARY										
a.	BALANCE ON HAND LAST REPORT				\$ 33.97						
b.	TOTAL RECEIPTS THIS PERIOD				\$ 446.03						
C.	TOTAL DISBURSEMENTS THIS PERIOD				\$ 500.00						
d.	BALANCE ON HAND (12.a. plus 12.b. mi	nus 12.c.)				\$	0				
e.	TOTAL LOANS OUTSTANDING					\$(J				
f.	TOTAL OBLIGATIONS OUTSTANDING					\$ <u>D</u>					



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
KICHAUS MOKES	FROM: 10-24-10 TO: 1-15-11
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)	\$ 466.03
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 466.03
16. LOANS RECEIVED THIS REPORTING PERIOD	s_U
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 466.03
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> </u>	
\$	
\$	
\$	
\$	
\$	
\$	
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.)	\$ 500.30
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)	3
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 1	2.f.)\$



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				RING THE PERIOD			
RICHIARD MOLES				TO: 1-15-1)			
				Amount			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU	TIONS FR	OM PRECEDING PA	GE (enter \$0 if first itemized p	0			
4. COMPLETE THE APPROPRIATE ITEMS FOR E	EACH ITEM	IZED CONTRIBUTION (contributions totaling more than \$)			
First Name ELC+1ARD	Middle Nar	ne	Contribution Received For:	Amount of Contribution			
Last Name/Organization Name	Cele		☐ Primary Election				
MOSES Address			Runoff (Local Election	466.03			
1706 CARE YORLL G	State	Zip Code	Date of Contribution	Aggregate This Election			
Mr. Julier	72	37122					
Occupation NET-VAN ENGINEEL			11-3-10				
EMPLOYER FACENCER EMPLOYER LBM C TECHNOLOGIES							
First Name	Middle Nan	ne	Contribution Received For:		Amount of Contribution		
Last Name/Organization Name	1		Primary Election	General Election			
Address	****		Runoff (Local Elections	s Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election		
Occupation							
Employer							
First Name	Middle Name	е	Contribution Received For:		Amount of Contribution		
First Name Last Name/Organization Name	Middle Name	е		General Election	Amount of Contribution		
	Middle Name	е			Amount of Contribution		
Last Name/Organization Name	Middle Name	Zip Code	Primary Election		Amount of Contribution Aggregate This Election		
Last Name/Organization Name Address			☐ Primary Election ☐				
Last Name/Organization Name Address City			☐ Primary Election ☐				
Last Name/Organization Name Address City Occupation			Primary Election Runoff (Local Elections Date of Contribution		Aggregate This Election		
Last Name/Organization Name Address City Occupation		Zip Code	☐ Primary Election ☐				
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election Runoff (Local Elections Date of Contribution Contribution Received For:		Aggregate This Election		
Last Name/Organization Name Address City Occupation Employer First Name	State	Zip Code	Primary Election Runoff (Local Elections Date of Contribution Contribution Received For:	Only) General Election	Aggregate This Election		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State	Zip Code	Primary Election Runoff (Local Elections Date of Contribution Contribution Received For:	Only) General Election	Aggregate This Election		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State Middle Name	Zip Code	Primary Election Runoff (Local Elections Date of Contribution Contribution Received For: Primary Election	Only) General Election	Aggregate This Election Amount of Contribution		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Name	Zip Code	Primary Election Runoff (Local Elections Date of Contribution Contribution Received For: Primary Election	Only) General Election	Aggregate This Election Amount of Contribution		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation Employer	State Middle Name	Zip Code	Primary Election Runoff (Local Elections Date of Contribution Contribution Received For: Primary Election	Only) General Election	Aggregate This Election Amount of Contribution		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Name State	Zip Code Zip Code	Primary Election Runoff (Local Elections Date of Contribution Contribution Received For: Primary Election	Only) General Election	Aggregate This Election Amount of Contribution		

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE							2. REPORT COVERING THE PERIOD				
RECHARD MOSKS							FROM: TO: 16-24-10 1-15-11				
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)									73-11		
Complete the Following for the Source of the Loa			LOutstanding	Loop Palance	Loon		1,	non.	1 00	Iclandin	n Loan Palance
First Name Middle Name LEE			Outstanding Loan Balance (Beginning of Period)		Loans Received		Loan Payments		Outstanding Loan Balance (End of Period)		
Last Name/Organization Name MoSES				500.00			500.00		V		
Address				Loan Received For:				Date of Loan			
1706 CAPE JONE CT			☐ Primary Election ☐ General Election					_			
1706 CAPE YORK CT City MT. JUSTET State TN	Zip Code	Zip Code			(Local Elections Only))		
	orsers or Guar	antors fo	or Above Loa	oan (If more space is needed please attach a page)							
First Name	Middle Nam	θ	First Name			Middle Name					
Lasl Name/Organization Name			A	Last Name/Organization Name							
Address				Address				•			
City	State	Zip Co	de	City					State		Zip Code
Amount Guaranteed Outstanding				Amount Guarar	ileed Oulsta	nding					
First Name	First Name Middle Name			First Name				Middle Name			
Last Name/Organization Name				Last Name/Organization Name							
Address				Address							
City State Zip Co			de	City State					State		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	Zip Cod	le	City					State		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 Zip Code			e	Cily State Zip Code					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.) (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.)			_					anding Loan Balance End of Period)			