



## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <p style="text-align: center; margin: 0;"><i>Billy J. Phillips</i></p>	14. REPORT COVERING THE PERIOD FROM: <i>4-1-10</i> TO: <i>4-24-10</i>
<b>RECEIPTS</b>	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period) .....	\$ <u>0</u>
b. Itemized Contributions (over \$100 from each source this period) .....	\$ <u>0</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) .....	\$ <u>0</u>
16. LOANS RECEIVED THIS REPORTING PERIOD .....	\$ <u>0</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.) .....	\$ <u>0</u>
<b>DISBURSEMENTS</b>	
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>Water List</u>	\$ <u>35.00</u>
<u>Cornerstone Ink</u>	\$ <u>76.42</u>
<u>Cornerstone Ink</u>	\$ <u>64.46</u>
<u>ALL STARS Trophies</u>	\$ <u>327.75</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee) .....	\$ <u>503.63</u>
b. Itemized Expenditures (Over \$100 each payee this period) .....	\$ <u>0</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) .....	\$ <u>503.63</u>
20. LOAN REPAYMENTS MADE THIS PERIOD .....	\$ <u>0</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) .....	\$ <u>503.63</u>
<b>22. IN-KIND CONTRIBUTIONS</b>	
a. Unitemized in-kind contributions (\$100 or less from each source this period) .....	\$ <u>0</u>
b. Itemized in-kind contributions (over \$100 from each source this period) .....	\$ <u>0</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) .....	\$ <u>0</u>
<b>23. OBLIGATIONS</b>	
a. Unitemized Obligations Outstanding (\$100 or less each) .....	\$ <u>0</u>
b. Itemized Obligations Outstanding (Over \$100 each) .....	\$ <u>0</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) .....	\$ <u>0</u>



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Billy J. Phillips</i>				2. REPORT COVERING THE PERIOD FROM: <i>4-1-10</i> TO: <i>4-24-10</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Billy</i>		Middle Name <i>J.</i>		Contribution Received For:	
Last Name/Organization Name <i>Phillips</i>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <i>211 Rock Dr</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Bristol</i>		State <i>VA</i>	Zip Code <i>37620</i>	Date of Contribution	
Occupation <i>Retiree</i>				Aggregate This Election	
Employer				Amount of Contribution <i>\$ 507.63</i>	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	
Occupation				Aggregate This Election	
Employer				Amount of Contribution	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	
Occupation				Aggregate This Election	
Employer				Amount of Contribution	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	
Occupation				Aggregate This Election	
Employer				Amount of Contribution	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	
Occupation				Aggregate This Election	
Employer				Amount of Contribution	
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.)					