

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>10-4-2010</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Jim Holcomb</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>08-5-2010</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>1151 White Top Rd. Black City</u> <u>TN.</u> <u>37618</u> <u>423-646-3246</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>Sullivan Co. Clerk</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Jim Holcomb</u>
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD <u>07-27-2010</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>09-30-2010</u>
9. (Check one) a. <input type="checkbox"/> 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. <input checked="" type="checkbox"/> 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. <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <u><i>Jim Holcomb</i></u> <u>10/4/10</u> signature of candidate date </div> <div style="text-align: center;"> <u><i>Jim Holcomb</i></u> <u>10/4/10</u> signature of political treasurer date </div> </div>	
11. WITNESS SIGNATURE <u>Melinda Ligon</u> <u>10-4-10</u> signature of witness date	<u>Melinda Ligon</u> <u>10-4-10</u> signature of witness date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>3,483²⁹</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>0</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>3483²⁹</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>0</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jim Holcomb			2. REPORT COVERING THE PERIOD FROM: 7/27/10 TO: 9/30/10	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name Mynouche	Middle Name	Purpose of Expenditure Web management		Amount of Expenditure 300⁰⁰
Last Name/Business Name Hermantross				
Address 12 Little Knob Rd				
City Asheville	State NC			
First Name	Middle Name	Purpose of Expenditure Webpage creation		Amount of Expenditure 300⁰⁰
Last Name/Business Name Dept. of Happiness				
Address 3201 Westerwald Ave				
City Baltimore	State MD			
First Name	Middle Name	Purpose of Expenditure fenceposts		Amount of Expenditure 200⁰⁰
Last Name/Business Name farm supply				
Address 11 E.				
City Piney Flats	State TN			
First Name	Middle Name	Purpose of Expenditure 600²⁹ gas campaign travel		Amount of Expenditure 600²⁹
Last Name/Business Name Bristol Walmart				
Address Volunteer Pkway				
City Bristol	State TN			
First Name Jim	Middle Name	Purpose of Expenditure loan repayment		Amount of Expenditure 1000⁰⁰
Last Name/Business Name Holcomb				
Address 1151 White Top Rd				
City Blue City	State TN			
First Name Bert	Middle Name	Purpose of Expenditure contribution Primary + General		Amount of Expenditure 1083⁰⁰
Last Name/Business Name Long				
Address 711 Holston Ave.				
City Bristol	State TN			
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.)				3483²⁹ 3083²⁹