CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

FJAN 30 2020

1. DATE OF REPORT	10		~ ~		
1. DATEOFREPORT	2.a. NAME OF (CANDIDATE OR	4	2 DUIL	SON-COUNTY
	1 Cha	185	Leema	en ELECT	ON COMMISSION
2.b. IF COMMITTEE, NAME OF CANDIDATE	•			3. ELECTION DAT	
				202	^
4.a. CAMPAIGN ADDRESS AND PHONE.				3020	<u> </u>
Street or Rural Route	City		State	Zip Code	Phone
1339 Curro Bend,	. 1			· ^ /L	
A CANDIDATE O HOME ADDRESS IN TO	Lebanon		- 1 N	37087	4158049088
4.b. CANDIDATE'S HOME ADDRESS (if differently Street or Rural Route	ent than 4.a.) City		04-4	m	_
Substitution (Substitution)	City		State	Zip Code	Phone
		-	***************************************		
5. OFFICE SOUGHT (include district number.	if applicable)	6. NAME	OF POLITICAL	TREASURER (may be	e candidate)
Assessor St Property			cia Le		,
7. CATEGORY OR REPORT (Check one)		1 16(1/1	LIN LE	C Pring	
		П	П		\mathcal{W}
AMRST SECOND THIRD	FOURTH	PRE-	PRE-	MID-YEAR	YEAREND
QUARTER QUARTER QUARTE 8.a. BEGINNING DATE OF REPORTING PERIOD	R QUARTER	PRIMARY	GENERAL	SUPPLEMENTAL	SUPPLEMENTAL
		8.b. ENDING	DATE OF REPO		
11-16-19			1-15.	·20	
9. (Check one)			······································		
2 M This compaign is avament from what if					
a. This campaign is exempt from detail tures total \$1,000 or less for this rep	ed disclosure becaus	se contributions	(including in-kin	ed) received total \$1,0	00 or less AND expendi-
b. This campaign is required to file a di	etailed financial disclo	sure because o	contributions (inc	cludina in-kind) receiv	ed total more than \$1,000
and/or expenditures total more than	\$1,000 for this report	ling period.	`	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	The state of the s
10. I/we do solemnly swear or affirm that the	nformation contained	in this campai	an financial disc	locues ropart in true	and that this are the
accurate accounting or campaign contribut	ons and expenditures	s required to be	reported by the	candidate committee	by the Compains
r mancial disclosure Act. Additionally, I/We	: Swear or affirm that :	no campaign co	ontributione have	a hoon avacaded for t	he personal financial
benefit of the candidate or for any other no	npolitical purpose as	defined by the	federal internal r	revenue code.	,
D 1 D	1. 75 00		1.	10	
Charles Jeemen	1-30-20	,	lace	carea	- 1/20/20
signature of candidate	date	7	signature of	political treasurer	date
			•		-2.0
11. WITNESS SIGNATURE					
			ā	,	
Tenn 17 to be	121-	~ 2	1	1 11	/
signature of witness	1 <u> </u>	so re	vy 4	traker	1-30-20
signature of witness	date		✓ Signatu	re of witness	date
12. SUMMARY					
a DALANCE ON HANDLAGT DEDOCT					
a. BALANCE ON HAND LAST REPORT					30
		大人人。	~ (A+	I AAA AR	et all a second
b. TOTAL RECEIPTS THIS PERIOD			\$	1,000,000	
		(3"	`	701,95	
c. TOTAL DISBURSEMENTS THIS PERIOD.			\$		
					AACAC
d. BALANCE ON HAND (12.a. plus 12.b. n	ninus 12.c.)			\$	285,05
e. TOTAL LOANS OUTSTANDING				1 1 to 1	100000
		· · · · · · · · · · · · · · · · · · ·		5 X 8	
					(00 M
f. TOTAL OBLIGATIONS OUTSTANDING		•••••		,	00 60.00
				S 11 1 1 1 1	i



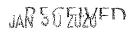
SUMMARY PAGE - CANDIDATE

JAN 30 2020

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT CONCERING THE PERIO
Charles Lee man	FROM: 11-1E-FGTION COMMUSCICAD
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <i>O</i>
b. Itemized Contributions (over \$100 from each source this period)	\$ <i>O</i>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	s 3
16. LOANS RECEIVED THIS REPORTING PERIOD	
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ 0
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 1880
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)
WBOT CHECKS \$ 15,72	
CREATIVE GRAPHICS QARDS \$ 97,2	3
ADVANCED SIGNS MALNETIC STEN \$ 68,8	3
What service charge \$ 12,0	δ
MR. KEN ARNOLD-ROND STENS \$ 4361.	45
ADVANCED SIGNS-KOTE STEN \$ 72;	24
\$	
\$	
\$	
Total of Expenditures (\$100 or less each payee)	
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 454,45
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.)	\$ <u>701,75</u>
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)	2
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 i item	12.f.)\$

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATIES ION

1. NAME OF CANDIDATE OR CO	MMITTEE			2 REPORT COL	/ERING THE PERIOD
				FROM:	TO:
3 TOTAL ITEMIZED CAMPAICAL	CONTRIBUTIONS	2011 2220 22 210		<u> </u>	Amount
TOTAL ITEMIZED CAMPAIGN COMPLETE THE APPROPRIATE IT	TEMS FOR EACH ITE	ROW PRECEDING	PAGE (enter \$0 if first itemized p	page)	
4. COMPLETE THE APPROPRIATE I	Middle Na	MIZED CONTRIBUTI	ON (contributions totaling more than :	\$100 from any contribu	and and report to the control of the
	INIOGE N	sile	Contribution Received For:		Amount of Contribution
Last Name/Organization Name		······································	Primary Election	General Election	
Address			Runoff (Local Election	s Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation			,		
Émployer					
First Name	Middle Na	me\ (Contribution Received For:	The second secon	Amount of Contribution
Last Name/Organization Name		++		General Election	James an Gorningungi)
Address	1	1	Runoff (Local Elections		
City	State	Zip Cook	Date of Contribution	, only	Aggregate This Election
Occupation	\ 	1			Aggregate This Election
Employer	110				
First Name	Middle Nam	е	Contribution Received For:		Amount of Contribution
ast Name/Organization Name			Primary Election	General Election	
Address		1	Runoff (Local Elections	Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
mployer					
irst Name	Middle Name		Contribution Received For:	and the second s	Amount of Contribution
ast Name/Organization Name	<u> </u>		J	General Election	- Solidibulon
ddress			Runoff (Local Elections		
ty	State	Zip Code	Date of Contribution	ong,	Aggregate This Einstein
cupation					Aggregate This Election
ıployer			_	:	
	ingeneral contrata				
TOTAL ITEMIZED CONTRIBUTIO (Carry forward to item 3. of next page if addit (If this is the last page of contributions, this a	ional pages of this form are	used.) m 15b. of summarv.)			
<u> </u>					

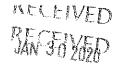


ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS GARBIDATE

1. NAME OF CANDIDATE	OR COMMITTEE	 1 			2. REPORT COV	VERING THE PERIOD
			·		FROM:	TO:
3. TOTAL ITEMIZED IN-K	IND CONTRIBUTI	ONS FR	OM PRECEDING PA	GE (enter \$0 if first itemized page	a)	Amount
4. COMPLETE THE APPROP	PRIATE ITEMS FOR	EACH ITE	MIZED IN-KIND CONT	RIBUTION (in-kind contributions totaling	more than \$100 from any	contributor during the period)
First Name		Middle		In-Kind Contribution Receive	d For:	Value of In-Kind Contribution
Last Name/Organization Name		<u> </u>		Primary Election	General Election	
Address				Runoff (Local Election Date of In-Kind Contribution	ns Only)	Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution	/	
Occupation	Employer	<u> </u>				
			· again			
First Name		Middle	Name \	In-Kind Contribution Received	f For: General Election	Value of In-Kind Contribution
Last Name/Organization Name			1	Runoff (Local Election		
Address		بيسر	· I want	Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer	1/	1			
					The second will be a second with the second	
irst Name	/	Middle	lame	In-Kind Contribution Received Primary Election	For: General Election	Value of In-Kind Contribution
ast Name/Organization Name		1	+	Runoff (Local Elections		
Address		1	\	Date of In-Kind Contribution	~	Aggregate this Election
City		Shale	Zip Code	Description of In-Kind Contribution	-	1
Occupation	Employer	1 1				
irst Name	Marie Ma	Middle N	ame	In-Kind Contribution Received		Value of In-Kind Contribution
ast Name/Organization Name				· · · · · · · · · · · · · · · · · · ·	General Election	
ddress				Runoff (Local Elections Date of In-Kind Contribution	Only)	Agamagio this Etra-tia-
ity		State	7in Code			Aggregate this Election
ccupation	Employer	State	Zip Code	Description of In-Kind Contribution		
p = 10(1)	спроуег					
st Name		Middle Nar	TIE	In-Kind Contribution Received	For:	Value of In-Kind Contribution
t Name/Organization Name		<u> </u>	· · · · · · · · · · · · · · · · · · ·	1	General Election	
iress				Runoff (Local Elections (Only)	
,		Chat-	13:0:			Aggregate this Election
upation	Emplace	State	Zip Code	Description of In-Kind Contribution		
ο μαιίο!!	Employer					
TOTAL ITEMIZED IN-KINI (Carry forward to item 3. of next page)	age if additional pages o	of this form a	are used.)			
(If this is the last page of in-kind or	ontributions, this amoun	t must be sh	nown in item 22b. of summa	ry.)		i

WILSON COUNTY TEMIZED STATEMENT OF EXPENDITURES OF CAMBUIDATE

1. NAME OF CANDIDATE OR COMMITT	EE		
Charles Lee-			2. REPORT COVERING THE PERIOD FROM: //-/470: /-/5-25
3. TOTAL ITEMIZED CAMPAIGN EXPEN		ACE (antos CO H.E	Amount
4. COMPLETE THE APPROPRIATE ITEMS F	OR EACH ITEMIZED EXPENDITURE	(expenditures, totaling more than \$10)	0 to any naven during the project
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address BAHK &	TRUST	- WELKS	5 1000
WEST MAIN S		J Great	15,20
City LEBANON	State Zip Code 57087		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name CREATIUE GRAPH	ICS		
WEST MAIN	57	CAROS	97,23
LEBANON	State Zip Code 37/4 887		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name Business Name Advanced Signs	-	MAGNET	SIGNS
Address West Main ST		MAGNET FOR TR	UCK 68,83
city Lebanon		· ·	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name WILSON BANK &	TEUST	Line of the same	
Address WEST MAIN ST		SERVICE	CGE 12,00
LEBANSH	State Zip Code	Compet	
irst Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name		UARD	
OFF COLES FERR	7	YARD SIGN-	5 436,45
LEBANON	State Zip Code 37087		
irst Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ADVANCED STOMS	>	BIG	7/
Idress WEST MATN ST		BIG	72,24
LEBANON	Spale Zip Code S7867		
. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3, of next page if additional page (If this is the last page of expenditures, this amount mu	es of this form are used.) ust be shown in item 19b. of summary.)		701.95
De.			



ITEMIZED STATEMENT OF LOANS - CANDIDATE

									The state of the same of
1. NAME OF CANDIDATE OR		************	2	. REPORT	COVER	ING THE PERIOD			
Charles Le			F	ROM:	T	TO:			
3. COMPLETE THE APPROPRI	LATE ITEMS FOR F	EACH ITEM	IZED LOAN	(I 1 1 2 P			11-16-	19	1-15-20
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		IZED LOAN	(loans totaling m	ore than \$1	00 from any sour	ce during the	period)	
Complete the Following for the Sour	ce of the Loan Middle Name	,	Tourster die	. I B. I					
SFIF	MIGDIC NAME		1	g Loan Balance g of Period)	Loan Recei	<i>_</i> ~i	Loan ayments		anding Loan Balance (End of Period)
Last Name/Organization Name			-{		1	\times		1	, and and and and a
			لرا	0	<i>V</i>			1-12	
Address			Loan Rece				Date of Lo		
City	State Zib	Code	Prima	ry Election	☐ Genera	al Election	7	MI	9-19
`			☐ Runo	f (Local Elections O	nly)		1	1-1	/ (/
	List All Endorsers of	r Guarantors	for Above Lo	an (If more space	e is neede	ed please attac	h a page)		
First Name		le Name		First Name		e di la comi di comi di comi		Middle N	lame
Last Name/Organization Name		· · · · · · · · · · · · · · · · · · ·			2				
SSS (Market Organization (Notific				Last Name/Orga	nizalion Na	im s		•	
Address				Address			\leftarrow		
Cia.			·····						
City	State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding	· · · · · · · · · · · · · · · · · · ·			Amount Guarante	ed Outstan	iding			
First Name y	Middle	e Name	*****	First Name		Addition programme and the second	alle vice and a second		the second of the special section of the second
Charles	1-10	e Name OW ERF)	T I ST HEATIE				Middle N	ame
Last Name/Organization Name				Last Name/Organ	nization Nar	ne		<u> </u>	
Address 1339 CATE	N BEN	0 80	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Address		···			
Address 1339 CAIR City LESAHON Amount Guaranteed Outstanding	State	Zip Co	15/2/17	City				State	Zip Code
Amount Guaranteed Outstanding	\$1,000	<u> </u>	7001	Amount Guarantee	ed Outstand	ding		I	
First Name	Personal contraction production con-	Name		First Name		State of the second	eron walkers were	Middle N	ame
Last Name/Organization Name								Wildow 1	o no
Edit Hamororganization Hame				Last Name/Organi.	zation Nam	e			
Address				Address					
City									
	State	Zip Coo	de	City				State	Zip Code
Amount Guaranteed Outstanding	·· · · · · · · · · · · · · · · · · · ·			Amount Guarantee	d Outstand	ing			
First Name	Middle	Marca	The desired of the second	dak e ar o lêskirinên mezape	et engelski der en e	en en State Grand Grand Grand Grand St.		18-2-1	The second se
institution in state of the sta	Middle	Name		First Name				Middle Nar	me
Last Name/Organization Name				Last Name/Organiz	ation Name	3	1		
Address				A 11					
				Address					
City	State	Zip Cod	е	City			<u> </u>	State	Zip Code
mount Guaranteed Outstanding				Amount Guaranteed	d Outstandir	ng		~~	
		eni angganggani dan s			et de la constantion		· (viii)	ST-5007-500-000-000-000-000-000-000-000-00	
Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.)				Outstanding Loan B (Beginning of Pe		Loans Ponsived	Loan		utstanding Loan Balance
(Total loan payments should also be shown in	n item 20. on summary p	age.)	ļ	_	1100/	Received	Paymer		(End of Period)
(Total outstanding loan balance should also be	snown in item 12.e. on f	ront page.)		0		1600	0	-1/.	000,00



JAN 30 2020

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE MINISSION

						301019	
1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD				
				FROM:	ТО:	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
COMPLETE THE APPROPRIATE ITE OBLIGATION (obligations totaling more person/vendor at the end of the reporti	than \$100	CH ITEMIZED owed to any	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 !	Vame	1/				
Last Name/Business Name			A 7				
				:			
Address		No. of the second	1/	7			
City	State	Zip Code	7\ /				
Description of Obligation					<u> </u>		
Flist Name	Middle N	ame (The same				garana garan aran da sana da sanaga s	
Last Name/Business Name		\mathcal{I}					
Address	$\overline{}$	1					
City	State	Zin Code	1				
Description of Obligation	A					4.	
First Name	Niddle Na	ame					
ast Name/Business Name			1				
ddress							
City	State	Zip Code	-				
Description of Obligation							
Irst Name	Middle Na	me					
ast Name/Business Name							
dress		****					
ity	State	Zip Code					
escription of Obligation			•	**************************************			
TOTALS					I		
(Total from Outstanding Balance - (End of Period in item 23b. on summary page.)) column mus	t also be shown					