CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

OCT 12 2020

	1			
1. DATE OF REPORT	2.a. NAMEOFO	ANDIDATE OR COMMITTEE	EL	WILSON COUNTY ECTION COMMISSION
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DA	
4.a. CAMPAIGN ADDRESS AND PHONE			202	<u>(</u>
Street or Rural Route	City	State	Zip Code	Phone
306 Floral Street	1 00	TAI		
4.b. CANDIDATE'S HOME ADDRESS (if different	Lebenon thanka	177	<u> 3708 7</u>	615-509-6191
Street or Rural Route	City	State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME OF POLITICAL	TREASURER (may b	oe candidate)
Ward 2 city council		Dessire 5		
7. CATEGORY OR REPORT (Check one)	r1			
FIRST SECOND THIRD	FOURTH	PRE- PRE-	L_J MID-YEAR	YEAR-END
QUARTER QUARTER QUARTER	QUARTER	PRIMARY GENERAL	SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING DATE OF REPO		
8-12.20		9-30 3	え る	
9. (Check one)				
a. This campaign is exempt from detailed ures total \$1,000 or less for this repor	d disclosure becaus ting period. (Comp	e contributions (including in-ki lete items 12d., 12e. and 12f.)	nd) received total \$1,0	000 or less AND expendi-
b. This campaign is required to file a deta	eiled financial disclo	sure because contributions (in	alcalia a la Ricalia	
and/or expenditures total more than \$1	1,000 for this reporti	ng period.	cluding in-kind) recer	ved total more than \$1,000
10. I/we do solemnly swear or affirm that the inf	ormation contained	in this campaign financial dis	clasure report is true	and that this report is on
accorate accounting of campaign contribution	ns and expenditures	required to be reported by the	e candidate committo	a by the Compains
Financial Disclosure Act. Additionally, I/we s benefit of the candidate or for any other nonp	wear or affirm that r	10 campaign contributions hav	e heen evnended for	the personal financial
I D	ontical purpose as t	defined by the lederal internal	revenue code.	
Leon Love III	M-+ G	Hoden	1 OFAIL	(1)-9-21)
signature of candidate	date	signatura o	f political treasurer	5 0 00
•	GGIO	signature o	politica: treasurer	date
11. WITNESS SIGNATURE.		^		
			Λ	
Wordten Low	10-9-20	1 Vant	In I rule	16 40 30
signature of witness	date	roun	- XVVE	10-9-20
	date	signati	re of witness	date
12. SUMMARY				· · · · · · · · · · · · · · · · · · ·
a. BALANCE ON HAND LAST REPORT			\$	-
b. TOTAL RECEIPTS THIS PERIOD			1866.76	_
b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PERIOD		•	1506	, To
		***************************************		*V
d. BALANCE ON HAND (12.a. plus 12.b. min	nus 12.c.)		9	366.76
A TOTAL LOANS OUTCOM				δ
e. TOTAL LOANS OUTSTANDING			······ \$	S
				A
f. TOTAL OBLIGATIONS OUTSTANDING			\$	s <u> </u>



OCT 122020

SUMMARY PAGE - CANDIDATE

13 NAME OF CANDIDATE OF COMMITTEE (1. F. III	WILS	ON COUNTY
13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORTEDING	NICOMHESIENIO
RECEIPTS	FROM: 8-12-20	10:9-30-20
15. CONTRIBUTIONS (other than loans and interest)		
a. Unitemized Contributions (\$100 or less from each source this period)	: 914.76	
b. Itemized Contributions (over \$100 from each source this period)	\$ 722.00	_
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		.\$ 1621
16. LOANS RECEIVED THIS REPORTING PERIOD		.\$ <u>230.00</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	••••••	s <u>O</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	•••••	: 1866:76
DISBURSEMENTS		7 0 7 10
19. EXPENDITURES (other than loan payments)		
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.	g., printing, postage, g	asoline)
Postage \$ 22.01		,
Sign Placement \$ 50.0		
T		i
Post Cards \$ 55.0	<u>, , , , , , , , , , , , , , , , , , , </u>	
	<u>4</u>	
Car magnets \$ 91.4	<u>4</u>	
Campaign nuttons \$ 46.0	0	
Banner Post \$ 31.45	· 	
\$		
	····	-
Total of Evocaditures (\$400 as less seek as	721 1 0	
	\$_331,28	
b. Itemized Expenditures (Over \$100 each payee this period)		
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		1
20. LOAN REPAYMENTS MADE THIS PERIOD	\$	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	.	1506.00
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)	B	
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 1		



OCT 12 2020

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDAGETY

				4.6	ELIOTION COMMISSION			
1. NAME OF CANDIDATE OR COMMI	i 1 1			2. REPORT CO	VERING THE PERIOD			
	FROM:	TO:						
3. TOTAL ITEMIZED CAMPAIGN CON	TRIBUTIONS F	ROM PRECEDING	PAGE (enter \$0 if first itemized					
4. COMPLETE THE APPROPRIATE ITEMS First Name				\$100 from any contrib	utor)			
	Middle N.	ame	Contribution Received For:		Amount of Contribution			
Last Name/Organization Name			Primary Election	General Election				
Address 5) Maddo		npson	Runoff (Local Election	ns Only)	\$500.00			
Lebanon Occupation	State 7	Zin Code	Date of Contribution		Aggregate This Election			
Employer			_					
First Name Stephane	Middle Na	me	Contribution Received For:		Amount of Contribution			
Last Name/Organizakon Name BCa + 5 h q W			Primary Election	General Election				
Address (2) Shady C	irale		Runoff (Local Election	is Only)	222.00			
Lebanon	State ${\cal N}$	Zip Code 3 > 0 8	Date of Contribution		Aggregate This Election			
Occupation Real for Employer								
Blactwell Rea	1+V		Sept 4, 2	-020				
First Name	Middle Nan	ne	Contribution Received For:		Amount of Contribution			
Last Name/Organization Name			Primary Election	General Election				
Address			Runoff (Local Elections	Only)				
City	State	Zip Code	Date of Contribution		Aggregate This Election			
Occupation								
mployer			4					
First Name	Middle Nam		Contribution Received For:		Amount of Contribution			
ast Name/Organization Name				General Election	Outerpution			
ddress			Runoff (Local Elections	Only)				
ity	State	Zip Code	Date of Contribution		Aggregate This Election			
ccupation								
nployer				į				
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional p (If this is the last page of contributions, this amount	ages of this form are	used.)						
28								

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE 2020

1. NAME OF CANDIDATE OR COMMITTEE LEON LOVE III 3. TOTAL ITEMIZED CAMPAIGN EXPENDIT 4. COMPLETE THE APPROPRIATE ITEMS FOR					Amount 20 - 20
4. COMPLETE THE APPROPRIATE ITEMS FOR First Name	Middle N		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name I Mage 8 360/5, Address 21850 ath Ma City Lubanon	gins ple state	Now St. Zip Code	yardsig	. n 5	943.20
First Name	Middle N	ame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Banners on the C Address City	\eaf	Zip Code	Campaign Banners		
First Name	Middle Na	ime	Purpose of Expenditure		3/76 Amount of Expenditure
Last Name/Business Name Address City	State	Zip Code			
First Name	Middle Nar	ne	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name					
Address					
City	State	Zip Code	•		
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name ast Name/Business Name	Middle Nam	Е	Purpose of Expenditure		Amount of Expenditure
Address					
Dity	State	Zip Code			
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must	of this form a be shown in i	re used.) item 19b. of summary.)			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDA	TE OR COMMITTEE	=						2.	REPORT	COVE	ERING	THE PE	RIOD
									ROM:		TO	-30-	
3. COMPLETE THE AP	PROPRIATE ITEMS	FOR EACH	ITEMI2	ZED LOAN	(loans totaling	more than \$	100 from an	SOUTC	/2 - 2.0	ン eriod)	7	<u> </u>	20
and the second s	Geografia Geografia en 1800 en	and the state of t	(SANGES 123)	egentratization essential	in necessary of the second	Wild was a second	AND THE STATE OF T	waster.	o on my me p	errou)	godennes (de la composition)	egelegelege ag kommenden e	ing kangayang kalèn
Complete the Following for First Name			· · · · · · · · · · · · · · · · · · ·	Outstonding	Lasa Dalas a	T	1						
1 .					Outstanding Loan Balance Loans (Beginning of Period) Received			Loan Payments				ng Loan Ba Lof Period)	
Lest Name/Organization Name	<u></u>			1		<i>.</i>			-				
	1/1					\$ 2	30.00						
Address				Loan Receiv					Date of Loa	an			
City	State	Zip Code		Primar	Primary Election General Election								
				☐ Runoff	(Local Elections								
	List All Endo	rsers or Guar	antors fo	or Above Loa	n (If more spa	ice is need	ded please	attach	a page)		~ · · · · · · · · · · · · · · · · · · ·		
First Name		Middle Nam	250,000,000	to Manager State Commission of the	First Name		Kirk Turkey Season Street Se		Control of the second	Midd	le Name	pagina anawayan na	2 12 12 1
Last Name/Organization Name					i ant Name (Ou								
Cast Name: Organization Name					Last Name/Org	janization N	iame						
Address					Address		*** **				,,	·····	
C1			1									·	
City		State	Zip Co	ode	City					State		Zip Code	
Amount Guaranteed Outstanding	9	l			Amount Guara	iteed Outst	anding			1	····	1	"
Fire! Namo	and program of the second revenue of the second	Middle Nome										er et ekskalt en er	
First Name Middle Name				First Name Middle Name									
Last Name/Organization Name					Last Name/Organization Name								
Address					Address								
					Address								
City		State	Zip Co	de	City State Zip Code								
Amount Guaranteed Outstanding		<u></u>	<u></u>		Amount Guaran	teed Outsta	inding			L			
First Name	First Manya			Spiriture reserving diagram	First Name Middle Name								
	First Name Middle Name				First Name Middle Name								
Last Name/Organization Name				Last Name/Organization Name									
Address					Address								
City		State	Zip Cod	je	City					State		Zip Code	
Amount Guaranteed Outstanding			I		Amount Guarant	eed Outsta	nding						 .
	enterna torra paga kalanda kalanda kalanda a kalanda k	espesion differential design	CONTRACTOR OF THE		Marine and the second	Www.	ners activity and	gar erana.	x10-1149445-1341,146-274-1			ante especial de la	Administration
First Name		Middle Name			First Name Middle Name								
Last Name/Organization Name				Last Name/Organization Name									
Address				Address									
City		State	Zip Cod	le	City				I	State		Zip Code	
Amount Guaranteed Outstanding							P			Cidio		zip ovue	
moont Grantanteen Ontstalland				ľ	Amount Guarant	eed Outstan	aing						
4. Totals for all Loans (complete on last page of itemized loans)			position entire describerations	Outstanding Loan Balance Loans Loan Outstand			anding Loar	n Balance					
(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.)					(Beginning of		Receiv		Paymer	nts		End of Peri	
(Total outstanding loan balance s	hould also be shown in item	12.e. on front pa	age.)										

