CAMPAIGN FINANCIAL DISCLOSURE STATEMENTED

For State and Local Candidates For Single-Candidate Committees

OCT :	107	2022
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DATE OF REPORT	11.01	1 10			WILSON COUNTY
10-3-22	Char	175 LE	emon	3. ELECTION DATE	- COTION LONGINIO
2.b. IF COMMITTEE, NAME OF CA	NDIDATE			2023	
				0,0,0	
4.a. CAMPAIGN ADDRESS AND PH Street or Rural Route	ONE City		State	Zip Code	Phone
1339 CAIRD BENE	RO, LEBANI	DN 7	74	37087 4	15 804-9088
4.b. CANDIDATE'S HOME ADDRES Street or Rural Route	S (if different than 4.a.) City		State	Zip Code	Phone
5. OFFICE SOUGHT (include distri	ct number, if applicable)	6. NAME OF	POLITICAL T	REASURER (may be	e candidate)
1RUSTEE		Char	les he	eman	
7. CATEGORY OR REPORT (Check FIRST SECOND QUARTER QUARTER	THIRD FOURTH QUARTER QUARTER	PRE- PRIMARY 8.b. ENDINGD	PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING		1	30 2		
7-26-	22	831			
 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. Signature of candidate Signature of political treasurer date					
11. WITNESS SIGNATURE signature of witness	10/3/22 date	_(End signate	Ure of witness	10/3/22 date
12. SUMMARY					4/
	REPORT		***************************************	\$ 19,04	**
				\sim	_
b. TOTALRECEIPTS THIS PERI	OD		.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	19.04	
	IS PERIOD			\$ 12 10 1	- accept 0
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)					
e. TOTAL LOANS OUTSTANDI	VG				\$
f. TOTAL OBLIGATIONS OUTS	TANDING	.,			\$

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OCT 3 0 2022

SUMMARY PAGE - CANDIDATE

WILSON COUNTY

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVE RING THE PERIOD				
Charles Leeman	FROM: 7-24- TO: 9-30-22				
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	2 Z				
a. Unitemized Contributions (\$100 or less from each source this period)\$					
b. Itemized Contributions (over \$100 from each source this period)					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)					
16. LOANS RECEIVED THIS REPORTING PERIOD					
17. INTEREST RECEIVED THIS REPORTING PERIOD					
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$_ <i>O</i>				
DISBURSEMENTS					
19. EXPENDITURES (other than loan payments)					
a. Expenditures (\$100 or less each payee this period) (must be listed by category - ACLOUNT CLOSED 4/9/22 \$ 1/9/5/20122 \$ 1/9/5/	04 00 				
Total of Expenditures (\$100 or less each payee)	2				
b. Itemized Expenditures (Over \$100 each payee this period)\$ c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)\$					
0. LOAN REPAYMENTS MADE THIS PERIOD					
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)\$					
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)	\$				
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i it	em 12.f.)\$				