RECEIVED NY
JAN 24 2023

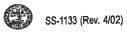
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Judicial Single - Candidate Committees

1. D	ATE OF REPORT THAN HARY 17, 2023 2.a. NAMI	E OF CANDII	DATE	TIMM	14 LEA		
2 h. N	IAME OF CANDIDATE'S COMMITTEE				3. ELECTION DA	NTE	
	FRIENDS OF JUDGE JIMM	4 604			202	2	
	AMPAIGN ADDRESS AND PHONE treet or Rural Route City		, s	tate	Zip Code	Phone	
163	3 W. MAIN ST. STE 600 LEE	BANON	7	W_	37087	615.767.0591	
	ANDIDATE'S HOME ADDRESS (if different than 4.a.) treet or Rural Route City LEBAN	ON	S 77	tate	Zip Code 37087	Phone 615-767-0591	
5. Jl	UDICIAL OFFICE SOUGHT (include district number, if a	oplicable)			CAL TREASURER		
	NERAL SESSIONS JUDGE DIVI	7	LA	URBV	SMITH		
FIRST			PRE- RIMARY	PRE- GENERAI	MID-YE SUPPLEME		
8.a. B	TER QUARTER QUARTER QUARTE EGINNING DATE OF REPORTING PERIOD	8.b.	. ENDING DA	TE OF REPO	RTING PERIOD		
	10-1-22		1	-15.	23		
9. (Ch	eck one)						
a.	This campaign is exempt from detailed disclosures expenditures total \$1,000 or less for this reporting	period. (Co	mplete items	12d., 12e. a	nd 12t.)		
b.	This campaign is required to file a detailed financia and/or expenditures total more than \$1,000 for this	reporting p	eriod.			ceived total more than \$1,000	
10. SI	GNATURE OF CANDIDATE	11.5			LTREASURER		
Signat	I do solemnly swear or affirm that the information contained in thiscampaign financial disclosure report is true and accurate. Additionally, I 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.						
Signat	tue of Witness Date	2	Signature of	Political Tre	asprer .	1333 Date	
		\	Signatue of	e Q 4	Shloso) // <u>33/3</u> 3	
12. SUI	MMARY BALANCE ON HAND LAST REPORT				3574	46	
b.	TOTAL RECEIPTS THIS PERIOD						
-	TOTAL DISBURSEMENTS THIS PERIOD				-		
c. d.	BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)					s <u>3574,46</u>	
е.	TOTAL LOANS OUTSTANDING					15 non 00	
f.	TOTAL OBLIGATIONS OUTSTANDING					\$	

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
JIMMY LEA	FROM: /0/1/22 TO: ///S/23
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
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	ss
17. INTEREST RECEIVED THIS REPORTING PERIOD	s _ <i>N</i>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	s
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)
\$	
\$	
\$	·
\$	_
\$	
\$	
\$	_
Total of Expenditures (\$100 or less each payee)	\$
b. Itemized Expenditures (Over \$100 each payee this period)	
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.)	
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 iten	



Page 2 of 7

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	-		A	2. REPORT COVER	RING THE PERIOD		
I. INAMIE OF CANDIDATE ON COMMITTEE	311	MMYLE	7	FROM: 10/1/22	TO: //5/23		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FRO	M PRECEDING PAG	E (enter \$0 if first itemized p	# O			
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	CH ITEMIZ	ED CONTRIBUTION (C	ontributions totaling more than \$	100 from any contributor)			
First Name	Middle Name		Contribution Received For:	Amount of Contribution			
Last Name/Organization Name			Primary Election	General Election			
and a general section of the section							
Address			Runoff (Local Elections Only)				
State Zip Code			Date of Contribution	Aggregate This Election			
Occupation							
Employer							
First Name	Middle Nam	96	Contribution Received For		Amount of Contribution		
Last Name/Organization Name			Primary Election	General Election			
Address			Runoff (Local Election	ns Only)			
	Zip Code	Date of Contribution		Aggregate This Election			
City	State						
Occupation							
Employer							
First Name	Middle Nam	0	Contribution Received For	:	Amount of Contribution		
First Name Last Name/Organization Name	Middle Nam	8		General Election	Amount of Contribution		
	Middle Nam	е		General Election	Amount of Contribution		
Tast Name/Organization Name Address	Middle Nam	e Zip Code	Primary Election	General Election	Amount of Contribution Aggregate This Election		
Tast Name/Organization Name Address City			☐ Primary Election	General Election			
Last Name/Organization Name Address City Occupation			☐ Primary Election	General Election			
Tast Name/Organization Name Address City			☐ Primary Election	General Election	Aggregate This Election		
Last Name/Organization Name Address City Occupation		Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election			
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election	Aggregate This Election		
Last Name/Organization Name Address City Occupation Employer First Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election ns Only) General Election	Aggregate This Election		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	General Election ns Only) General Election	Aggregate This Election		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address	State State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election ns Only) General Election	Aggregate This Election Amount of Contribution		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election ns Only) General Election	Aggregate This Election Amount of Contribution		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election ns Only) General Election	Aggregate This Election Amount of Contribution		
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Nan	Zip Code Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	General Election ns Only) General Election	Aggregate This Election Amount of Contribution		

SS-1131(Rev. 2/06)

Page 3 of 7

RDA 1159

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE JIMMY LEA 2. REPORT COVERING THE PERIOD FROM: 10/1/22 TO: 1/15/23								
TOTAL STEP HITTO IN 1/1/1/10 CONT			/	Amount				
TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)								
4. COMPLETE THE APPROPRIATE TE			D 114-KIND CONTINUE			Value of In-Kind Contribution		
First Name	Middle	le Name		In-Kind Contribution Received For: In-Kind Contribution Received For: General Election Value of In-Kind Contribution				
Last Name/Organization Name			Runoff (Local Elections Only)					
Address			Date of In-Kind Contribution Aggregate this Election					
City State Zip Code			Description of In-Kind Contribution					
Occupation	Employer							
First Name	Middl	lle Name		In-Kind Contribution Receive	d For:	Value of in-Kind Contribution		
				Primary Election	General Election			
Last Name/Organization Name				Runoff (Local Election	is Only)			
Address				Date of In-Kind Contribution		Aggregate this Election		
City	State	•	Zip Code	Description of In-Kind Contribution				
Occupation	Employer							
					d Paris	Value of In-Kind Contribution		
First Name Middle Name			1	In-Kind Contribution Receive Primary Election	General Election	Value of Ithritin contamination		
Last Name/Organization Name				Runoff (Local Election	ns Only)			
Address				Date of In-Kind Contribution		Aggregate this Election		
City	State	e	Zip Code	Description of In-Kind Contribution				
Occupation	Employer				¥			
					J.Pan	Value of In-Kind Contribution		
First Name	Midd	die Name		In-Kind Contribution Receive Primary Election	General Election	Value of In-Iana Community		
Last Name/Organization Name				Runoff (Local Electio	ns Only)			
Address				Date of In-Kind Contribution Aggregate this Election				
City	State	e	Zip Code	Description of In-Kind Contribution				
Occupation	Employer							
				In-Kind Contribution Receiv	red For:	Value of In-Kind Contribution		
First Name Middle Name			Primary Election	General Election	1 3 1 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			
Last Name/Organization Name			Runoff (Local Electio	ns Only)	Aggregate this Election			
Address			Date of In-Kind Contribution		Aggregate ins cacadii			
City	State	e	Zip Code	Description of In-Kind Contribution				
Occupation	Employer							
5. TOTAL ITEMIZED IN-KIND CO	NTRIBUTIONS					#0		
(Carry forward to item 3. of next page if a (If this is the last page of in-kind contribu	dditional pages of this	s form are st be sho	e used.) own in Item 22b. of summary	<i>(</i> -)		# 0		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	1	MMY L	2. REPORT FROM: 10	COVERING THE PERIOD. 1/22 TO: 1/15/23 Amount
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	RES FROI	M PRECEDING PAGE	E (enter \$0 if first itemized page)	\$0
4. COMPLETE THE APPROPRIATE ITEMS FOR EA			Purpose of Expenditure	Amount of Expenditure
First Name	Middle Nam	19	Fulpose of Experiment	,
Last Name/Business Name				
Address				
City	State	Zip Code		
First Name	Middle Nam	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	Middle Nam	e	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name				
Address				
City	State	Zip Code		
First Name	Middle Nam	ne	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name]	
Address]	
City	State	Zip Code		
First Name	First Name Middle Name			Amount of Expenditure
Last Name/Business Name				
Address				
City	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		#0	

SS-1129 (Rev. 4/02)

RDA 1159

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVERING THE PERIOD FROM: TO:									
JIMMY LEAT 10/1/22 1/15/23									
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (toans totaling more than \$100 from any source during the period)									
Complete the Following for the Source of the Loan			Outstanding L	nan Ralance	Loans	-	oan	Outstar	nding Loan Balance
First Name Middle Name Outstanding Lo (Beginning of				f Period)	Received	Pay	ments		End of Period)
Last Name/Organization Name # 15,0						-		4/9	5,000.00
Address Loan Receiver 104 SCARLETT PL					General E	Election	Date of Loan	l	
State Zio Code				Local Elections	Only)				
List All Endors			or Above Loar	n (If more spa	ce is needed	please attach	a page)		
First Name	Middle Name			First Name				Middle N	ame
Last Name/Organization Name				Last Name/Or	ganization Nam	е			
Address				Address					
City	State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding				Amount Guara	inteed Outstand	ling		(=) = (=)	
First Name Middle Name				First Name Middle Name					
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City	State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding				Amount Guara	anteed Outstand	ding			
First Name	Middle Name			First Name				Middle	Name
Last Name/Organization Name	Last Name/Organization Name			Last Name/O	ganization Nam	18			
Address				Address					
City	State	Zip C	ode	City State Zip Code					Zip Code
Amount Guaranteed Outstanding		_		Amount Guar	anteed Outstand	ding			
First Name	Middle Name) }		First Name				Middle	Name
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City	State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding				Amount Guar	anteed Outstand	ding			· · · · · · · · · · · · · · · · · · ·
4. Totals for all Loans (complete on last page of	itemized loa	ius)			Loan Balance of Period)	Loans Received	Loa Paym		Outstanding Loan Balance (End of Period)
(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.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)					000.00	1,0001700	-	_	\$15,000.00
(Total outstanding loan balance should also be shown in iter	n 12.0. OH HORL	hañe'\		17		-			-



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	4	2. REPORT COV	RING THE PERIOD / 1/15/23			
COMPLETE THE APPROPRIATE ITEMS F OBLIGATION (obligations totaling more than person/vendor at the end of the reporting person.)	Outstanding Balance (Beginning of Period)	FROM: /O/// Debt Incurred This Period	Payments This Period	Oulstanding Balance (End of Period)		
First Name Middle Name						
Last Name/Business Name			1			
Address						
City	State	Zip Code				
Description of Obligation		1				
First Name	Middle Na	me				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name Middle Name						
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Na	me				
Last Name/Business Name						-
Address			1			
City	State	Zip Code				
Description of Obligation						
First Name	Middle Na	me				
Last Name/Business Name			1			
Address						
City	State	Zip Code				
Description of Obligation		li.				
4. TOTALS		at along hos along	40	40	\$10	40
(Total from Outstanding Balance - (End of Period) in item 23b. on summary page.)	#0	40	410	470		

