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 JUL -9 2020 12:15
 WILSON COUNTY COMMISSION

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT July 2nd, 2020	2.a. NAME OF CANDIDATE OR COMMITTEE James Maness										
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE November 3rd, 2020										
4.a. CAMPAIGN ADDRESS AND PHONE <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Street or Rural Route</td> <td style="width: 20%;">City</td> <td style="width: 15%;">State</td> <td style="width: 15%;">Zip Code</td> <td style="width: 20%;">Phone</td> </tr> <tr> <td>2558 Edinburgh St.</td> <td>Old Hickory</td> <td>TN</td> <td>37138</td> <td>615-357-7440</td> </tr> </table>		Street or Rural Route	City	State	Zip Code	Phone	2558 Edinburgh St.	Old Hickory	TN	37138	615-357-7440
Street or Rural Route	City	State	Zip Code	Phone							
2558 Edinburgh St.	Old Hickory	TN	37138	615-357-7440							
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) <table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">Street or Rural Route</td> <td style="width: 20%;">City</td> <td style="width: 15%;">State</td> <td style="width: 15%;">Zip Code</td> <td style="width: 20%;">Phone</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>		Street or Rural Route	City	State	Zip Code	Phone					
Street or Rural Route	City	State	Zip Code	Phone							
5. OFFICE SOUGHT (include district number, if applicable) Mayor	6. NAME OF POLITICAL TREASURER (may be candidate) James Maness										
7. CATEGORY OR REPORT (Check one) <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> FIRST QUARTER</td> <td><input checked="" type="checkbox"/> SECOND QUARTER</td> <td><input type="checkbox"/> THIRD QUARTER</td> <td><input type="checkbox"/> FOURTH QUARTER</td> <td><input type="checkbox"/> PRE-PRIMARY</td> <td><input type="checkbox"/> PRE-GENERAL</td> <td><input type="checkbox"/> MID-YEAR SUPPLEMENTAL</td> <td><input type="checkbox"/> YEAR-END SUPPLEMENTAL</td> </tr> </table>		<input type="checkbox"/> FIRST QUARTER	<input checked="" type="checkbox"/> SECOND QUARTER	<input 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		
<input type="checkbox"/> FIRST QUARTER	<input checked="" type="checkbox"/> SECOND QUARTER	<input 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 April 1st, 2020	8.b. ENDING DATE OF REPORTING PERIOD June 30th, 2020										
9. (Check one) <p>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.)</p> <p>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.</p>											
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.											
<u><i>James Maness</i></u> signature of candidate	<u>7-2-20</u> date	<u><i>James Maness</i></u> signature of political treasurer	<u>7-2-20</u> date								
11. WITNESS SIGNATURE											
<u><i>Tracy Maness</i></u> signature of witness	<u>7-2-20</u> date	<u><i>Tracy Maness</i></u> signature of witness	<u>7-2-20</u> date								
12. SUMMARY											
a. BALANCE ON HAND LAST REPORT	\$ <u>0.00</u>										
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>10,433.41</u>										
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>164.39</u>										
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>10,269.02</u>										
e. TOTAL LOANS OUTSTANDING	\$ <u>500.00</u>										
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>										



SUMMARY PAGE - CANDIDATE

WILSON COUNTY ELECTION COMMISSION

13. NAME OF CANDIDATE OR COMMITTEE (In Full) James Maness	14. REPORT COVERING THE PERIOD	
	FROM: 4-1-20	TO: 6-30-20

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 99.00

b. Itemized Contributions (over \$100 from each source this period) \$ 9,834.41

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 9,933.41

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 500.00

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 10,433.41

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)

Bank Process Fee	\$ <u>3.17</u>
Check Purchase	\$ <u>33.63</u>
Postage	\$ <u>16.50</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 53.30

b. Itemized Expenditures (Over \$100 each payee this period) \$ 111.09

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 164.39

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 164.39

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 75.00

b. Itemized in-kind contributions (over \$100 from each source this period) \$ 0

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 75.00

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ 0

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WILSON COUNTY
ELECTION COMMISSION

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE James Maness				2. REPORT COVERING THE PERIOD	
				FROM: 4-1-20	TO: 6-30-20
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Susan		Middle Name		Contribution Received For:	
Last Name/Organization Name Schulert				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 1912 Mays Chapel Rd				<input type="checkbox"/> Runoff (Local Elections Only)	
City Mt. Juliet	State TN	Zip Code 37122	Date of Contribution June 12, 2020		Amount of Contribution \$1,000.00
Occupation Retired				Aggregate This Election \$1,000.00	
Employer Retired					
First Name Peter		Middle Name		Contribution Received For:	
Last Name/Organization Name Schulert				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 1912 Mays Chapel Rd				<input type="checkbox"/> Runoff (Local Elections Only)	
City Mt. Juliet	State TN	Zip Code 37122	Date of Contribution June 12, 2020		Amount of Contribution \$1,000.00
Occupation Manager				Aggregate This Election \$1,000.00	
Employer Pace Analytical					
First Name Brett		Middle Name		Contribution Received For:	
Last Name/Organization Name Holmes				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 1124 N Wood St, Unit 1				<input type="checkbox"/> Runoff (Local Elections Only)	
City Chicago	State IL	Zip Code 60622	Date of Contribution June 1, 2020		Amount of Contribution \$500.00
Occupation Managing Partner				Aggregate This Election \$500.00	
Employer Steel City Management LLC					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name Transfer from 2018 City Commission Campaign Account				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 2558 Edinburgh St.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Old Hickory	State TN	Zip Code 37138	Date of Contribution June 30, 2020		Amount of Contribution \$7,334.41
Occupation				Aggregate This Election \$7,344.41	
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					\$9,834.41

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

WILSON COUNTY
ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE James Maness				2. REPORT COVERING THE PERIOD			
				FROM: 4-1-20	TO: 6-30-20		
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		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name Staples				Printing & Mailing Supplies		\$111.09	
Address 401 S Mt Juliet Rd, Suite 635							
City Mt. Juliet		State TN	Zip Code 37138				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name							
Address							
City		State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name							
Address							
City		State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name							
Address							
City		State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name							
Address							
City		State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name							
Address							
City		State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name							
Address							
City		State	Zip Code				
5. TOTAL ITEMIZED EXPENDITURES						\$111.09	
(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.)							

RECEIVED
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 WILSON
 ELECTION COMMISSION

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE James Maness				2. REPORT COVERING THE PERIOD FROM: 4-1-20 TO: 6-30-20					
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)									
Complete the Following for the Source of the Loan									
First Name James		Middle Name Robert		Outstanding Loan Balance (Beginning of Period) 0		Loans Received 500.00	Loan Payments 0	Outstanding Loan Balance (End of Period) 500.00	
Last Name/Organization Name Maness				Address 2558 Edinburgh St.		City Old Hickory		State TN	Zip Code 37138
Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)				Date of Loan 5-12-20					
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)									
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
4. Totals for all Loans (complete on last page of itemized loans) (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.)				Outstanding Loan Balance (Beginning of Period) 0.00		Loans Received 500.00	Loan Payments 0.00	Outstanding Loan Balance (End of Period) 500.00	

