

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>Oct. 8, 2018</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Leslie R Schell</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>Aug. 2, 2018</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>1558B Brinkley Branch Rd Hendersonville TN 37075 (615) 452-8399</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone			
5. OFFICE SOUGHT (Include district number, if applicable) <u>County Commissioner, District 4</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Cullen Bubba Schell, Jr</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" 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 <u>July 24, 2018</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>Sept. 30, 2018</u>	
9. (Check one)			
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.)			
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.			
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>L Schell</u> signature of candidate		<u>Cullen Bubba Schell, Jr</u> signature of political treasurer	
<u>10/8/18</u> date		<u>10/8/18</u> date	
11. WITNESS SIGNATURE			
<u>[Signature]</u> signature of witness		<u>[Signature]</u> signature of witness	
<u>10/8/18</u> date		<u>10/8/18</u> date	
12. SUMMARY			
FILED			
a. BALANCE ON HAND LAST REPORT		A.M. <u>198.34</u>	P.M.
b. TOTAL RECEIPTS THIS PERIOD		<u>OCT 09 2018</u>	<u>427.48</u>
c. TOTAL DISBURSEMENTS THIS PERIOD		<u>SUMNER COUNTY</u>	<u>ELECTION COMMISSION</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		<u>625.82</u>	
e. TOTAL LOANS OUTSTANDING		<u>0</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		<u>0</u>	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) _____	14. REPORT COVERING THE PERIOD FROM: _____ TO: _____
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)	\$ <u>427.48</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>427.48</u>
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.)	
\$ <u>427.48</u>	
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 item 12.f.)	
\$ _____	



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Leslie R Schell		2. REPORT COVERING THE PERIOD FROM: 7-24-18 TO: 8-30-18	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 427.48
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name Jerry		Middle Name	
Last Name/Organization Name Foster		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1816 Liberty Ln		<input type="checkbox"/> Runoff (Local Elections Only)	
City Gallatin	State TN	Zip Code 37066	Amount of Contribution 427.48
Occupation Teacher	Date of Contribution 8-6-18		Aggregate This Election 427.48
Employer Summer Co BOE	Payment for 1/2 of mailer expense.		
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Amount of Contribution
Occupation	Date of Contribution		Aggregate This Election
Employer			
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Amount of Contribution
Occupation	Date of Contribution		Aggregate This Election
Employer			
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Amount of Contribution
Occupation	Date of Contribution		Aggregate This Election
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.)			