

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Leslie R. Schell</u>		
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route      City      State      Zip Code      Phone <u>1558B Brinkley Branch Hendersonville TN 37075 452-8398</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>Commissioner District 4</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Cullen B Schell</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input 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 checked="" type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>June 30 2019</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>Jan 15, 2020</u>	
9. (Check one)			
a. <input checked="" 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 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>[Signature]</u> signature of candidate		<u>[Signature]</u> signature of political treasurer	
<u>1/31/2020</u> date		<u>1/31/2020</u> date	
11. WITNESS SIGNATURE			
_____ signature of witness		_____ signature of witness	
_____ date		_____ date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT ..... <b>FILED</b> ..... PM ..... \$ <u>325.82</u>			
b. TOTAL RECEIPTS THIS PERIOD ..... AM ..... \$ <u>0</u>			
c. TOTAL DISBURSEMENTS THIS PERIOD ..... \$ <u>0</u>			
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) ..... <b>SUMNER COUNTY ELECTION COMMISSION</b> ..... \$ <u>325.82</u>			
e. TOTAL LOANS OUTSTANDING ..... \$ <u>0</u>			
f. TOTAL OBLIGATIONS OUTSTANDING ..... \$ <u>0</u>			

