CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For Multicandidate Committees (PACs)

		mmerces (nos)	
1. DATE OF REPORT 2020/06/09	2. NAME OF COMMITTEE Hendersonville	: Organizat	ion for Politic	al Education
2.A. SHORT NAME OF COMMITTEE (IF APPLIE	CABLE)			
HOPE				
ADDRESS AND PHONE Street or Rural Route				
44451.00	City	State	Zip Code	Phone
4. TYPE OF CANDIDATES SUPPORTED	Hendersonville	TN	37075	615-972-2260
N/A	STATE PUBLIC OFFICE] LOCAL PL	BLIC OFFICE	вотн 🔲
5.A. NAME OF POLITICAL TREASURER				
Ottis Jones			5. B .	DATE APPOINTED
6. CATEGORY OR REPORT (Check one)		<u> </u>		7/22/2019
FIRST SECOND THIRD QUARTER QUARTER QUARTER			MID-YEAR SUPPLEMENT	
7.A.BEGINNING DATE OF REPORTING PERIOD			EPORTING PERIOD	
04/01/2020 8. (Check one)	06	/30/2020		
and 10f must also be completed.) B. This committee is required to file a de \$1,000 and/or expenditures total more in this statement is true and that the fi required to be reported by political car	e tran \$1,000 for mis reponing telemen a era (aleban priwollo	period. I do sole	mly swear or affirm the	
*****	signature	of political treasur	rer	date
9. WITNESS SIGNATURE		e J. Jones ature of witness	,	07/09/202
10. SUMMARY	Au FILED	-		
a. BALANCE ON HAND LAST REPORT	AM ILEU	PM	1,350.5	2
b. TOTAL RECEIPTS THIS PERIOD	JUL 0 9 2020)
c. TOTAL DISBURSEMENTS THIS PERIOD; d. BALANCE ON HAND (10 a plus 10 b mi	SUMNER COUNTY		\$ 900.0	00
d. BALANCE ON HAND (10.a. plus 10.b. mi	inus 10.c)	<u>v</u>		\$ 450.52
e. TOTAL LOANS OUTSTANDING	••••			\$0
f. TOTAL OBLIGATIONS OUTSTANDING				

SUMMARY PAGE - PAC

11. NAME OF COMMITTEE (In Full)	12. REPORT COV	ERING THE PERIOD
Hendersonville Organization for Political Education	FROM4/01/20	TO:06/30/20
RECEIPTS 13. CONTRIBUTIONS (other than loans and interest)		1
a. Unitemized Contributions (\$100 or less from each source this period)	\$()
b. Itemized Contributions (over \$100 from each source this period)	s	0
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)	وتوميرونيوديوجونيا فالاصبحانية	. s0
14. LOANS RECEIVED THIS REPORTING PERIOD	Chart cotte de les liceenessies	s0
15. INTEREST RECEIVED THIS REPORTING PERIOD	*************************************	s 0
16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.)		
DISBURSEMENTS		
17. EXPENDITURES (other than loan payments)		
a. Unitemized Expenditures (\$100 or less each payee this period) (must be listed by gasoline)	category - e.g., prir	iting, postage,
\$		
S		
Total of Expenditures (\$100 or less each payee)		-
b. Itemized Expenditures (Over \$100 each payee this period)		
c. Independent Expenditures		•
d. TOTAL EXPENDITURES (other than loan repayments)(add 17.a., 17.b. and 17.c.)		
18. LOAN REPAYMENTS MADE THIS PERIOD	***********************************	\$0
19. TOTAL DISBURSEMENTS (add 17.d. and 18.) (must be shown in item 10.c.)	*******	sO
20.IN-KIND CONTRIBUTIONS		
a. Unitemized in-kind contributions (\$100 or less from each source this period)	. \$0	
b. Itemized in-kind contributions (over \$100 from each source this period)	.s0	<u> </u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.)	11210.48	\$0
21. LOANS		
LOANS OUTSTANDING (must be shown in item 10.e.)		\$0
22. OBLIGATIONS		
a. Unitemized Obligations Outstanding (\$100 or less each)		
b. Itemized Obligations Outstanding (Over \$100 each)		
c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown i item	10.f)	.\$0
SS-1136 (Rev. 11/04)	Page_	2 of 8

ITEMIZED STATEMENT OF CONTRIBUTIONS - PAC

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Tiendersonville C	луапіzatior	Tor Political Education	FROM:4/01	/2010: 06/30	
3. TOTAL ITEMIZED CAMPA	AIGN CONTRIBL	ITIONS FROM PRECEDING PAGE (enter \$0 if	first itemized oans)	Amount	
COMPLETE THE APPROPRI	ATE ITEMS FOR E	ACH ITEMIZED CONTRIBUTION (contributions totaling	to more than \$100 from any contribu	tor during the endoul)	
rsi Name	MIL	Last Name/Organization Name	San Contract of the Holling Contract	Amount of Controllation	
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ity	State	Zip Code		Date of Contribution	
colpation		Employer			
		C. Porto			
rst Name	Mi	Last Name/Organization Name	Amount of Contribution		
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ty	State	Zip Code		Date of Contribution	
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rst Name	M i.	Last Name/Organization Name		Amount of Contribution	
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t Name Iress Apperlion	State	Zip Code Employer		Date of Contribution	
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at Name ifress (cupation t Namo	State M.I.	Zip Code Employer		Date of Contribution	
coupation st Name dress y coupation st Name tress	State M.I.	Zip Code Employer Last Name/Organization Name		Date of Contribution Amount of Contribution	

ITEMIZED STATEMENT OF EXPENDITURES - PAC

NAME OF COMMITTEE Hendersonville Org.	anization	for Political I	Education	2. REPORT COV FR c4//01/20	ERING THE PERIOD TO: 06/30/20
3. TOTAL ITEMIZED EXPENDITE				TROMO 1720	Amount
4. COMPLETE THE APPROPRIATE	ITEMS FOR EA	CHITEMIZED EXPEN	IDITURE (expenditures totaling more than de the purpose of the expenditure (e.g. posta	\$100 to any payee during t age, printing) along with the	ha nasia di Mala au
First Name Melody	vliddle Na	ame	Purpose of Expenditure		spount of Expenditure
Last Name Black			Attorney Fee		900.00
Addres PO Box 154					Cate of Expenditure
City Hendersonville	5mg N	²¹⁰ C37075			05/08/2020
First Name	Viddle N	ame	Purpose of Expenditure	,	nount of Expenditure
Last Name Business Name	L				
Address					Date of Expenditure
City	State	Zíp Code			
First Name	Middle N	arne	Purpose of Expenditure		mount of Expenditure
Last Name/Business Name					
Address					Date of Expenditure
City	Siate	Zip Code			
First Name	vříddie Na	ame	Purpose of Expenditure	Ą	ount of Expenditure
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Aodress		······································	***************************************		Date of Expenditure
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asi Nama Gusiness Name	1				
Address					Date of Expenditure
City	State	Zip Code			
 TOTAL ITEMIZED EXPENDITURE (Carry forward to item 3. of next pag (If this is the last page of campaign of 	e if additional p				900.00
SS-1119-E (Rev. 1/00)				4 8	

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - PAC

1. NAME OF COMMITTE	E Organization fo	M-('4')	Pm : 4.	2. REPORT COVE	RING PERIOD
TIGHTGETSOTIVITIE	Organization for	or Political	Education	FROM: 4/01/20	TO: 06/30/20 Amount
3. TOTAL ITEMIZED IN-KIN	D CONTRIBUTIONS FRO	M PRECEDING PA	AGE (enter \$0 if first itemized page)		ı n
First Name		AT IT EMIZED 119-K	IND CONTRIBUTION (in-kind contribution	ons totaling more than \$100 from a	any contributor during the period)
rast Name	Niedle Name		Pescription of In-Kind Contribution		Value of In-Kind Contribution
Last Name/Organization Name		·			0
Aildress	,				
					Date of in-Kind Contribution
City	State	Zip Code			
Occupation					
Employer					
First Name	Niddle Name		Description of In-Kind Contribution		Value of In-Kind Contribution
Last Name/Organization Name					
Address					
- Agui das					
City	State	Zip Code			Date of In-Kind Contribution
Occupation					
Employer	 				
First Name	Middle Nam a		Pescription of in-Kind Contribution		/elue of in-Kind Contribution
Last Name/Organization Name		······································			
Address					
Caty	State	Zip Code	·		Date of in-Kind Contribution
Occupation					
Employe [*]					
First Name	Niddle Name		Description of In-Kind Contribution	\	alue of In-Kind Contribution
Last Name/Organization Name					
Aódress					
Сту	Siate	Zip Code	-		Date of In-Kind Contribution
Occupation		,			
Employer		··			
5. TOTAL ITEMIZED IN-K	IND CONTRIBUTIONS		3	:	
(Carry forward to ite	em 3 of next page if addition	al pges of this form	are used.)		^
(a was is the last pa	ge of in-Kind contributions, th	ns amount must be	shown in item 20.b. of summary.)	-	0
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SS-1125 (Rev. 2/0)

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RDA 1159

ITEMIZED STATEMENT OF INDEPENDENT EXPENDITURES - PAC

NAME OF COMMITTEE Hendersonville Organization for Political Education			2. REPORT COVERING THE PERIOD			
			FROM: 4/01/	2010: 06/30		
3. TOTAL ITEMIZED INDEP	ENDENT EXPENDIT	IBES EDOM	PRECEDING PAGE (enter \$0 if first itemize	4	Amount	
COMPLETE THE APPROPR	ATE ITEMS FOR FACE	ITEMIZED IN	NDEPENDENT EXPENDITURE (expenditures total	o page)	0	
period). Please remember to	include the purpose of	the expenditur	e (e.g. postage, panting) and the name of the can	eng more than \$100 to didate supported or of	posed.	
t Name Middle Name		Aurpose of Expenditure		Amount of Expenditure		
ast Name/Business Name	<u> </u>					
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ity	State Zip	Code		Supported 🔲		
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у	State Zip	Code		Supported 🔲		
si Name	Alddle Nama		Furpose of Expenditure	A	mount of Expenditure	
t Name/Business Name						
1095			C. St. D.		Bar J.F.	
1	A	2	Candidate Supported or Opposed & Office Sought	Opposed 🗆	Date of Expenditure	
'	State Zip	Code		Supported 🗖		
a) Itemized Independent Expend	itures			0		
					_	
			iditures, this amount must be showin in item 17c.		s	

ITEMIZED STATEMENT OF LOANS - PAC

1. NAME OF COMMITTEE Hendersonville Organia	2. REPORT COVERING THE			ERING THE PERIOD		
Hendersonville Organiz			FROM: 4/01/2	070: 06/30/		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 owed to any person/business at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Loans Received This Period	Loan Payments This Period	Outstantling Balance (End of Period)
First Name	Middle No	me				
asi Name/Business Name					0	
Address						
City	State	Zip Code	Date of Loan			
First Name	Middie Na	<u></u>			· ,	
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Last Name/Business Name	L					
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Address						
THE CONTRACTOR OF THE CONTRACT						
City	State	Zip Code	Date of Loan			1
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ast Name/Business Name	<u> </u>					
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~*	Juie	Zip Code	Date of Loan			
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			Data to FARE			
. TOTALS	•					
otal from "Outstanding Balance - (End of Period) Item 21 on summary page.)	COMMU	musi also be shown				0

ITEMIZED STATEMENT OF OBLIGATIONS - PAC

1. NAME OF COMMITTEE Hendersonville Organization for Political Education				2. REPORT COVERING THE PERIOD		
A AALIA DESTINATION OF THE PROPERTY OF THE PRO			7		FROM:4/01/20	TO: 06/30/2
OBLIGATION (obligations totaling more the end of the reporting period)	Outstanding Balance (Beginning of Penod)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)		
First Name	Middle I	lame				
Last Name/Business Name						
Address						0
Cny	State	Zip Code				
Description of Obligation				· · · · · · · · · · · · · · · · · · ·		
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Address						
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Description of Obligation		1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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y ·	State	Zip Code				
scription of Obligation						
economi di Unrigation						
TOTALS					f	
stal from "Outstanding Balance - (Enc of Period tem 22.b on summary page.)	i)" column mus	f also be shown				0