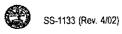
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

					
1. DATE OF REPORT	2.a. NAME OF C			· · ·	
	<u> </u> LE	e ret	ERSON		<u> </u>
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE	
4.a. CAMPAIGN ADDRESS AND PHONE			,	<u> </u>	
Street or Rural Route 248 LAKE TERRACE:	City	00-144	State	Zip Code	Phone 615
		670VN (M	C 7 N	21017	822-5420
4.b. CANDIDATE'S HOME ADDRESS (if differer Street or Rural Route	City		State	Zip Code	Phone
5. OFFICE SOUGHT (include district number,	if applicable)	6. NAME OF	POLITICAL	REASURER (may be c	andidate)
ALDERMAN - WARD 2		1	BRADLE	J. NIEM	IEC
7. CATEGORY OR REPORT (Check one)	FOURTH	PRE-	PRE-	MID-YEAR	YEAR-END
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY 8.b. ENDING D	GENERAL DATE OF REPO	SUPPLEMENTAL RTING PERIOD	SUPPLEMENTAL
01-16-2021		0	6 - 30 - 6	2021	
9. (Check one)					
 a. This campaign is exempt from details tures total \$1,000 or less for this report to file a deal and/or expenditures total more than 	orting period. (Competailed financial discless \$1,000 for this repor	olete items 12d., osure because co ting period.	12e. and 12f.)	cluding in-kind) received	total more than \$1,000
I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other no	ons and expenditure swear or affirm that	s required to be no campaign co	reported by the	e candidate committee be to been expended for the	y the Campaign e personal financial
Usingsture of candidate	- I date	<u> </u>	signatura o	f political treasurer	- 7-14-21 date
Signature of carrocate	date		signatule 0	i political treasurer	date
11. WITNESS SIGNATURE					
1 (Paris Lienie	7-14-21		Han	Mienie	e 7-14-71
signature of witness	date	フ	signal	ture of witness	date
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT				\$ 1,313.22	
BALANCE ON HAND LAST REPORT TOTAL RECEIPTS THIS PERIOD		•••••		.\$ 205.34	
c. TOTAL DISBURSEMENTS THIS PERIOD	*****		,	.\$	
d. BALANCE ON HAND (12.a. plus 12.b.	minus 12.c.	FILED	PM.	\$	1,518.56
e. TOTAL LOANS OUTSTANDING	الـــــــــــــــــــــــــــــــــــــ	1 5 2021		\$	-0-
f. TOTAL OBLIGATIONS OUTSTANDING ,	SUM	ANER COUNTY	/ ION:	\$	- 0 -

SUMMARY PAGE - CANDIDATE

	44 DEPORT COVERING THE REPION
13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD FROM: /-/6-2/ TO: 6-30-2/
RECEIPTS	7 /5 2/
15. CONTRIBUTIONS (other than loans and interest)	_ ,
a. Unitemized Contributions (\$100 or less from each source this period)	s 205.34
b. Itemized Contributions (over \$100 from each source this period)	\$
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	205,34
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>-6 -</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 205.34
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)
s	
¢.	
	
\$	
<u> </u>	
\$	
<u> </u>	
\$	
*	
Total of Expenditures (\$100 or less each payee)	\$0
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)	A -
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.6	b.)s
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 ite	m 12.f.)\$\$



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	REPORT COVER							
LEE PETER	TO: 6-30-21							
	200)	Amount - o -						
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT			 					
4. COMPLETE THE APPROPRIATE ITEMS FOR E			N (contributions totaling more than Contribution Received For:	o rou from any contributor	Amount of Contribution			
First Name	Middle Nam	e	Contribution Received For:		Amount of Contribution			
Last Name/Organization Name	1	· · · · · ·	Primary Election	General Election				
Address			Runoff (Local Election	Runoff (Local Elections Only)				
City	State	Zip Code	Date of Contribution	Date of Contribution				
Occupation	L	 						
Employer	· - · · · · · ·							
First Name	Middle Nan	ne	Contribution Received For		Amount of Contribution			
Last Name/Organization Name	ı		Primary Election	General Election				
Address			Runoff (Local Electio	ns Only)				
City	State Zip Code			Date of Contribution				
Occupation								
Employer								
Employer								
First Name	ne Middle Name				Amount of Contribution			
Last Name/Organization Name			Primary Election	General Election	:			
Last Harrier Organization Harrie								
Address			Runoff (Local Election	☐ Runoff (Local Elections Only) Date of Contribution Ag				
City	State	Zip Code	Date of Contribution	Date of Contribution				
Occupation	1 .							
Employer								
First Name	Middle Nar	me	Contribution Received For:	Amount of Contribution				
Last Name/Organization Name			Primary Election [General Election				
-								
Address		Runoff (Local Election	ons Only)					
City	State	Zip Code	Date of Contribution		Aggregate This Election			
Occupation								
Employer								

TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional page)					-0-			
(If this is the last page of contributions, this amount mu	si de snown in	itiem 100. of summary.)	1		1			

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COM	AMITTEE / CE	PETERSO	N	FROM: 1 -16-71	TO: 6-30-21			
					Amount			
3. TOTAL ITEMIZED IN-KIND CON					-0-			
4. COMPLETE THE APPROPRIATE ITE	MS FOR EACH ITEM	IZEU IN-KIND CONTRIB			,			
First Name	Middle Na	ame	In-Kind Contribution Received Primary Election	ed For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name			Runoff (Local Election	ns Only)				
Address			Date of In-Kind Contribution		Aggregate this Election			
City	City State Zip Code		Description of In-Kind Contribution	<u> </u>				
Occupation	Employer							
First Name	Middle N	lame	In-Kind Contribution Receive Primary Election	ed For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name		· ————	Runoff (Local Electio					
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contribution	1				
Occupation	Employer							
First Name Middle Name			In-Kind Contribution Received For: Primary Election					
Last Name/Organization Name		Runoff (Local Elections Only)						
Address			Date of In-Kind Contribution	Date of In-Kind Contribution Aggregate this Election				
City	State	Zip Code	Description of In-Kind Contribution	n				
Occupation	Employer							
First Name	Middle ↑	Name	In-Kind Contribution Received For: Primary Election General Election Value of In-Kind Cor					
Last Name/Organization Name			Runoff (Local Election					
Address			Date of In-Kind Contribution Aggregate this Election					
City	State	Žip Code	Description of in-Kind Contribution					
Occupation	Employer							
First Name	Middle N	łame	In-Kind Contribution Received For: Value of In-Kind Contribution					
Last Name/Organization Name		Runoff (Local Election	_					
Address			Date of In-Kind Contribution		Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contribution	ın	- Add to the state of the state			
Occupation	Employer							
5. TOTAL ITEMIZED IN-KIND CC (Carry forward to item 3. of next page if	additional pages of this for	m are used.)			-0-			
(If this is the last page of in-kind contribu	ations, this amount must be	e shown in item 22b. of summ		age <u>4</u> of <u>7</u>	RDA 1159			
SS-1128 (Rev. 2/06)			Pi	-a	NON 1103			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	ING THE PERIOD	
	EE	PETERSO	2	FROM: 1-16-21	TO: 6-30-21	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	RES FRO	M PRECEDING PAGE	E (enter \$0 if first itemized pa	qe)	Amount - o -	
4. COMPLETE THE APPROPRIATE ITEMS FOR E					od)	
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		_				
Address			1			
City	State	Zip Code	-			
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure	
		·			,	
Last Name/Business Name						
Address						
City	State	Zip Code	1			
E AV	Middle Nan		Duman of Every division	•	Amount of Even addition	
First Name	ne 	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	
			. Siposo oi Enportation			
Last Name/Business Name						
Address						
City	State	Zip Code				
			Duman of Tree 12		Amount of Europeliters	
First Name	Middle Nan	ne 	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code	1			
First Name	Middle Nan	ne .	Purpose of Expenditure	- · · · · -	Amount of Expenditure	
Last Name/Business Name		_				
Address		1				
City	State	Zip Code	-			
	<u> </u>					
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional page)	or of this !	are used)			-0-	
(If this is the last page of expenditures, this amount mu	ist be shown in	n item 19b. of summary.)				

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR CO	MMITTEE								ORT CO	OVERI	NG THE PERIOD
LEE PETERSON							FROM: 1-16-21 6-30-21			10:6-30-21	
3. COMPLETE THE APPROPRIA	TE ITEMS F	OR EACH IT	EMIZ	ED LOAN (I	oans totaling r	nore than \$100 t	from any sour	ce during	g the perio	od)	~6~
Complete the Following for the Source	of the Loan										
First Name	Middle Name (Outstanding L (Beginning o		Loans Received	i P	Loan Payments		Outstanding Loan Balance (End of Period)	
Last Name/Organization Name											
					oan Received For: Date of Loan						
City	State	Zip Code		☐ Primary Election ☐ General Elect☐ Runoff (Local Elections Only)			Election				
	List All Endo	sers or Guara	intors f	or Above Loa	n (If more spa	ice is needed	please attac	ch a pa	ge)		
First Name		Middle Name			First Name			-		Middle N	lame
Last Name/Organization Name					Last Name/Or	ganization Nam	ie				"
Address					Address			• •			
City		State	Zip C	ode	City					State	Zip Code
Amount Guaranteed Outstanding					Amount Guara	enteed Outstand	ling				
First Name Middle Name				First Name Middle Name					Name		
Last Name/Organization Name			•	Last Name/Organization Name							
Address					Address						
City		State	Zip C	Code	City					State	Zip Code
Amount Guaranteed Outstanding					Amount Guar	anteed Outstand	ding				•
First Name		Middle Name	2		First Name Middle Name					Name	
Last Name/Organization Name		<u> </u>			Last Name/O	rganization Nan	ne				
Address					Address	 				_	
City		State	Zip (Code	City					State	Zip Code
Amount Guaranteed Outstanding			<u> </u>		Amount Guar	anteed Outstan	ding			<u> </u>	
First Name Middle Name					First Name Middle Name					Name	
Last Name/Organization Name		<u> </u>			Last Name/C	rganization Nar	me		<u> </u>	<u>. </u>	
Address					Address					_	
City		State	Zip	Code	City					State	Zip Code
Amount Guaranteed Outstanding			<u> </u>	·	Amount Gua	anteed Outstan	iding			4	
(Total loans received should also be show	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.)					Loan Balance g of Period)	Loans Receive	d	Loa Paym		Outstanding Loan Balanc (End of Period)
(Total outstanding loan balance should als					<u></u>						- 0-

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	1	2. REPORT COVERING THE PERIOD				
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED					-21 TO:6-	
COMPLETE THE APPROPRIATE ITEMS F OBLIGATION (obligations totaling more than person/vendor at the end of the reporting person)	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)		
First Name	Middle Nan	ne				. "
Last Name/Business Name			<u> </u>	:		
Address						
City	State	Zip Code				
Description of Obligation			<u> </u>			
First Name	First Name Middle Name					
Last Name/Business Name			-			
Address			_			
City	State	Zip Code				
Description of Obligation		1.	<u>, I </u>			
First Name	Middle Nar	ne				
Last Name/Business Name			_			
Address			-			:
City	State Zip Code		1			
Description of Obligation						
First Name	Middle Nar	ne		:		
Last Name/Business Name						
Address						:
City	State	Zip Code				
Description of Obligation	L	<u> </u>	<u> </u>	ı		<u> </u>
First Name	Middle Nar	пе				
Last Name/Business Name	<u> </u>		-			
Address			1			
City	State	Zip Code	1			
Description of Obligation	1	L		i	l	
4. TOTALS	· · · · · ·	<u> </u>				
(Total from Outstanding Balance - (End of Period) of in item 23b. on summary page.)				- 0 -		