

AMENDED CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4-12-20</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Jim Waters</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Jim Waters</u>	3. ELECTION DATE <u>11-3-20</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>244 South Burn Dr. Hillier</u> <u>IN.</u> <u>37075</u> <u>615-945-0414</u>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>Same</u>	
5. OFFICE SOUGHT (include district number, if applicable) <u>Alderman Ward 6</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Jim Waters</u>
7. CATEGORY OR REPORT (Check one) <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 <u>4-1-20</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>6-30-20</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>Jim Waters</u> <u>4/12/20</u> <u>Jim Waters</u> <u>4/12/20</u> signature of candidate date signature of political treasurer date	
11. WITNESS SIGNATURE <u>Virginia Waters</u> <u>4-12-20</u> <u>Virginia Waters</u> <u>4-12-20</u> signature of witness date signature of witness date	
12. SUMMARY <div style="text-align: right; margin-bottom: 10px;">FILED</div> a. BALANCE ON HAND LAST REPORT AM PM \$ <u>0</u> b. TOTAL RECEIPTS THIS PERIOD <u>JAN 05 2021</u> \$ <u>1200.00</u> c. TOTAL DISBURSEMENTS THIS PERIOD <u>SUMNER COUNTY ELECTION COMMISSION</u> \$ <u>1454.53</u> d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ <u>0</u> e. TOTAL LOANS OUTSTANDING <u>\$254.53</u> \$ <u>254.54</u> f. TOTAL OBLIGATIONS OUTSTANDING \$ <u>0</u>	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="text-align: center; font-size: 1.2em; font-family: cursive;">Jim Waters</div>	14. REPORT COVERING THE PERIOD FROM <u>1-1-20</u> TO <u>6-30-20</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 0

b. Itemized Contributions (over \$100 from each source this period) \$ 1200.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 1200.00

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.) \$ _____

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) \$ 1454.53

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 1454.53

20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 1454.53

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.) \$ 0

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 in item 12.f.) \$ 0

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jim Waters	2. REPORT COVERING TIME PERIOD FROM 4-1-20 TO 6-30-20
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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 JIM	Middle Name	Outstanding Loan Balance (Beginning of Period) \$138.93	Loans Received \$254.54	Loan Payments 0	Outstanding Loan Balance (End of Period) \$373.47
Last Name/Organizational Name WATERS		Loans Received For <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Municipal/Local Election		Election Dates 5-20-20	
Address 244 SOUTH BURN DR H'VILLE TN 37061					






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/Organizational Name		Last Name/Organizational Name	
Address		Address	
City	State	City	State
Amount Guaranteed/Outstanding		Amount Guaranteed/Outstanding	
First Name	Middle Name	First Name	Middle Name
Last Name/Organizational Name		Last Name/Organizational Name	
Address		Address	
City	State	City	State
Amount Guaranteed/Outstanding		Amount Guaranteed/Outstanding	
First Name	Middle Name	First Name	Middle Name
Last Name/Organizational Name		Last Name/Organizational Name	
Address		Address	
City	State	City	State
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 1E on summary page.) (Total loan payments should also be shown in item 2D on summary page.) (Total outstanding loan balance should also be shown in item 1E on final page.)	Outstanding Loan Balance (Beginning of Period) \$138.93	Loans Received \$254.54	Loan Payments 0	Outstanding Loan Balance (End of Period) \$373.47
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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Jim Waters</i>		2. REPORT COVERING THE PERIOD	
		FROM: <i>2-1-20</i>	TO: <i>6-30-20</i>
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name <i>U.P.S. STORE</i>	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		<i>CAMPAIGN MAIL OUTS + DOOR HANGERS</i>	<i>\$1454 53</i>
Address <i>100 E. MAIN ST. SD</i>			
City <i>HULL</i>	State <i>SD</i>		
Zip Code <i>57075</i>			
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 (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.)			<i>\$1454 53</i>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jim Waters				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 \$1200.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name JAMIE		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name HOUDESHELL				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$1000.00
Address 111 INDIVIDUALS BLVD.				<input type="checkbox"/> Runoff (Local Elections Only)		
City H'VILLE		State TN	Zip Code 37615	Date of Contribution DONATION FOR YARD SIGNS 4-9-20		Aggregate This Election
Occupation OWNER - BRIDGESTONE TIRE						
Employer →						
First Name MARVIN		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name BUCK HARDT				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$300.00
Address 106 WESSINGTON PL.				<input type="checkbox"/> Runoff (Local Elections Only)		
City H'VILLE		State TN	Zip Code 37615	Date of Contribution DONATION FOR CAMPAIGN SHIRTS 4-4-20		Aggregate This Election
Occupation RETIRED						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		0
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						0
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		0
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						0
Employer						
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(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.)</small>					\$1200.00	

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<u>JIM WATERS</u>				FROM <u>1/1/72</u> TO <u>12/31/72</u>			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance Beginning of Period	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Name	Last Name/Business Name	Address				0
City	State	Zip Code	Description of Obligation				
First Name	Middle Name	Last Name/Business Name	Address				0
City	State	Zip Code	Description of Obligation				
First Name	Middle Name	Last Name/Business Name	Address				0
City	State	Zip Code	Description of Obligation				
First Name	Middle Name	Last Name/Business Name	Address				0
City	State	Zip Code	Description of Obligation				
4. TOTALS							
(Total from Outstanding Balance - (End of Period) column must add to Total in Item 2b on summary page.)							

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1 NAME OF CANDIDATE OR COMMITTEE Jim Waters 2 REPORT COVERING THE PERIOD 4-1-20 to 6-30-20

3 TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) Amount 630.20

4 COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)

First Name	Middle Name	In-Kind Contribution Received For	Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	<u>0</u>
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Date of In-Kind Contribution	Aggregate this Election
Occupation	Employer	Description of In-Kind Contribution	

First Name	Middle Name	In-Kind Contribution Received For	Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	<u>0</u>
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Date of In-Kind Contribution	Aggregate this Election
Occupation	Employer	Description of In-Kind Contribution	

First Name	Middle Name	In-Kind Contribution Received For	Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	<u>0</u>
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Date of In-Kind Contribution	Aggregate this Election
Occupation	Employer	Description of In-Kind Contribution	

First Name	Middle Name	In-Kind Contribution Received For	Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	<u>0</u>
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Date of In-Kind Contribution	Aggregate this Election
Occupation	Employer	Description of In-Kind Contribution	

First Name	Middle Name	In-Kind Contribution Received For	Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	<u>0</u>
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Date of In-Kind Contribution	Aggregate this Election
Occupation	Employer	Description of In-Kind Contribution	

5 TOTAL ITEMIZED IN-KIND CONTRIBUTIONS
 (Carry forward to item 3 on next page if additional pages in this form are used.)
 If this is the last page of in-kind contributions, this amount will be shown in item 3 of summary.