CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For Multicandidate Committees (PACs)

1. DATE OF REPORT 10-23-2020	2. NAME OF COMMITTEE (14) THENS FOR YOU	ositure Gowth.
2.A. SHORT NAME OF COMMITTEE (IF APPLICABLE)		
3. ADDRESS AND PHONE Street or Rural Royle 133 2 NOVISVIILE Fluy	City State Zip Code Aille15V1/le T11. 37072	Phone 615 859-5800
4. TYPE OF CANDIDATES SUPPORTED	STATE PUBLIC OFFICE LOCAL PUBLIC OFFICE [вотн 🗌
5.A. NAME OF POLITICAL TREASURER NUMBER NAME NO NO NO NO NO NO NO NO NO N		5.B. DATE APPOINTED 5-2000
6. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTEF 7.A.BEGINNING DATE OF REPORTING PERIOD	R QUARTER PRIMARY GENERAL SUPPLE 7.B.ENDING DATE OF REPORTING PERI	OD
October 1, 2020 8. (Check one)	October 24, 20	528
A. This committee is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. I do solemly swear or affirm that the information contained in this statement is true and that the committee has complied with all applicable provisions of the Campaign Financial Disclosure Act. (Items 10d., 10e. and 10f must also be completed.)		
St.,000 and/or expenditures total more than \$1,000 for this reporting period. I do solemly swear or affirm that the information contained in this statement is true and that the following page(s) are a complete and accurate accounting of all contributions and expenditures required to be reported by political campaign committees by the Campaign Financial Disclosure Act.		
	signature of political treasurer	10-23-2020 date
9. WITNESS SIGNATURE	signature of witness	10-23-20 2 0
	orginates of marioes	
a. BALANCE ON HAND LAST REPORT	FILED PM \$ 720	7.24
b. TOTAL RECEIPTS THIS PERIOD	\$	
c. TOTAL DISBURSEMENTS THIS PERIOD		
d. BALANCE ON HAND (10.a. plus 10.b.	minus 10.09UMNER COUNTY ELECTION COMMISSION	s 720,24
f. TOTAL OBLIGATIONS OUTSTANDIN	VG	\$

