CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAMEOFO	ANDIDATE OR COMMITTEE		
10-7-2020	LEE	PETER SOI	7	
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE	3,2020
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	0.4			
248 LAKE TERRACE D.	R. HENDE	State PRSONVILLE TN	Zip Code 37075	Phone 615 419-5721
CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	than 4.a.) City	State	Zip Code	Phone 615 822-5420
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME OF POLITIC	AL TREASURER (may be c	andidate)
ALDERMAN - WARD 2		BRAD	LEY J. NIE	MIEC
7. CATEGORY OR REPORT (Check one) FIRST SECOND THRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRE-	/ MID-YEAR L SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING DATE OF RE		
9. (Check one)		09 - 3	0-2020	
 a. This campaign is exempt from detailed tures total \$1,000 or less for this report b. This campaign is required to file a detained and/or expenditures total more than \$1. 	ting period. (Comp alled financial disclo	plete items 12d., 12e. and 1 Disure because contributions	2f.)	
I/we do solemnly swear or affirm that the infaccurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we shenefit of the cardidate or for any other none signature of candidate	ns and expenditure: wear or affirm that	s required to be reported by no campaign contributions defined by the federal inter	y the candidate committee b	v the Campaign
11. WITNESS SIGNATURE Signature of witness	/ C · 8 - 20,		une Nerma	10-7-2020 date
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT			s <u>2,202.7</u> 3	1
b. TOTAL RECEIPTS THIS PERIOD				
c. TOTAL DISBURSEMENTS THIS PERIOD			\$ 3,661.09	
d. BALANCE ON HAND (12.a. plus 12.b. mi				3,550.64
e. TOTAL LOANS OUTSTANDING			\$ _	-0-
f. TOTAL OBLIGATIONS OUTSTANDING			\$ -	-0-

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
LEE PETERSON	FROM: 7-1-20 TO: 9-30-20
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 1,659.00
b. Itemized Contributions (over \$100 from each source this period)	.\$ <u>2,350.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 4,009.00
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.)	\$ 4,009,00
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)
\$ 55.00	<u></u>
GRAPHIC DESIGN \$ 100.0	
MAGNETS \$ 54.6	3
\$	
<u> </u>	<u> </u>
\$	
\$	_
\$	
Total of Evanaditures (\$100 or loss such source)	20013
Total of Expenditures (\$100 or less each payee)	
b. Itemized Expenditures (Over \$100 each payee this period)	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>2,661.07</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>-0-</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 2,661,07
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.)	\$ <u>439.84</u>
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 item	12.f.)\$

Dans 2 4 8

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	0	_ 1	2. REPORT COVERING THE F	PERIOD
	LEE PETER	2.0 h	FROM: 7-1-20 TO: 9.	30-20
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU	TIONS FROM PRECEDI	NG PAGE (enter \$0 if first itemized p	Amount	80-
4. COMPLETE THE APPROPRIATE ITEMS FOR E				<u></u>
First Name	Middle Name	Contribution Received For:		Contribution
DENNIS	CRAIG			
Last Name/Organization Name BROWN		Primary Election	Géneral Election 3	00. <u>au</u>
Address 267 LAKE TERRACE A	DRIVE	Runoff (Local Election		
CITY HENDERSONVILLE	State Zip Code 37075	Date of Contribution	Aggregate	This Election
Occupation CERTIFIED PUBLIC	Account	T alida	3	00.00
Employer DAVIS BROWN TO				
First Name	Middle Name	Contribution Received For	Amount	of Contribution
STACY	INSURE INC.			A CARICICALITY
Last Name/Organization Name / A LE SS (O		Primary Election	General Election	000
Address 116 FRASER PLACE	.6	Runoff (Local Election	s Only)	
CHY HENDERSON VILLE	State Zip Code 7N 378	Date of Contribution	Aggregate	This Election
Occupation CERTIFIED REGISTERS	Nuger ANEC	THE TET A IN	10000	20 00
Employer SOM NO LENCE Ar		8/1/	2020 1,0	00
JOHN NOLENCE AN	IESTACSTA F.	C .		
First Name	Middle Name	Contribution Received For	Amount	f Contribution
i	MICUIE NAME	Continuation Received For	Amount o	, Gone Educati
Last Name/Organization Name	Modervane			
Last Name/Organization Name	<u> </u>	☐ Primary Election		
Last Name/Organization Name SMM NER COUNTY REPUP	<u> </u>	☐ Primary Election	General Election 50	DO. 10
Last Name/Organization Name SMM NER COUNTY REPUP	LI CATA ASSEM. #204 State Zip Code	Primary Election Runoff (Local Election Date of Contribution	General Election 50 S Only)	
Last Name/Organization Name SUM NER COUNTY REPUP Address 110 GLAN CY ST. City GOOD LETTS VILLE Occupation	U CATA ASSEMI #204 State Zio Code	Primary Election Runoff (Local Election Date of Contribution	General Election S Only) Aggregate	This Election
Last Name/Organization Name SUM NER COUNTY REPUP Address 110 GLANCY ST. City GOODLE TTSVILLE	LI CATA ASSEM. #204 State Zip Code	Primary Election Runoff (Local Election Date of Contribution	General Election S Only) Aggregate	90. ¹⁰
Last Name/Organization Name SUM NER COUNTY REPUP Address 110 GLAN CY ST. City GOODLE TTSVILLE Occupation POLITICS	LI CATA ASSEM. #204 State Zip Code	Primary Election Runoff (Local Election Date of Contribution	General Election S Only) Aggregate	This Election
Last Name/Organization Name SUM NER COUNTY REPUP Address 110 GLAN CY ST. City GOOD LETTSVILLE Occupation POLITICS Employer	UCAN ASSEMING #204 State ZipCode 70 370	Primary Election Runoff (Local Election Date of Contribution	General Election S Only) Aggregate 50	This Election
Last Name/Organization Name SMM NER COUNTY REPUP Address 110 GLANCY ST. City GOOD LETTS VILLE Occupation POLITICS Employer First Name MARK Last Name/Organization Name	UCAN ASSEM. #204 State Zip Code 70 370	Primary Election Runoff (Local Election Date of Contribution 8/29/3	General Election S Only) Aggregate Amount of	This Election Contribution
Last Name/Organization Name SMMNER COUNTY REPUPE Address 110 GLANCY ST. City GODDLETTSVILLE Occupation POLITICS Employer First Name MARK Last Name/Organization Name SM 1TH	UCAN ASSEMING #204 State ZipCode 70 370	Primary Election Runoff (Local Election Date of Contribution 8/29/3 Contribution Received For: Primary Election	General Election S Only) Aggregate Amount of General Election	This Election Contribution
Last Name/Organization Name SUM NER COUNTY REPUPE Address 110 GLAN CY ST. City GEODLETTSVILLE Occupation POLITICS Employer First Name MARK Last Name/Organization Name SM 1TH Address 210 STERLING P	U CAN ASSEM. #204 State Zip Code 370	Primary Election Runoff (Local Election Date of Contribution 8/29/3 Contribution Received For:	General Election S Only) Aggregate Amount of General Election	This Election O. P.
Last Name/Organization Name SMMNER COUNTY REPUP Address 110 GLAN CY ST. City GODDLETTSVILLE Occupation POLITICS Employer First Name MARK Last Name/Organization Name SM 1TH	U CAN ASSEM. #204 State Zip Code 370	Primary Election Runoff (Local Election Runoff (Local Election S/29/3 Contribution Received For: Primary Election Runoff (Local Election Date of Contribution	General Election S Only) Aggregate 50 Amount of General Election General Election Gonly)	This Election Contribution
Last Name/Organization Name SUM NER COUNTY REPUPE Address 110 GLAN CY ST. City GEODLETTSVILLE Occupation POLITICS Employer First Name MARK Last Name/Organization Name SM 1TH Address 210 STERLING P	LI CARN ASIEM. #204 State Zip Code 370; Middle Name P.	Primary Election Runoff (Local Election Runoff (Local Election Runoff (Local Election Primary Election Runoff (Local Election Date of Contribution	General Election S Only) Aggregate S Only) Amount of General Election Gonly) Aggregate	This Election Contribution This Election
Last Name/Organization Name SUM NER COUNTY REPUP Address 110 GLANCY ST. City GOOD LETTSVILLE Occupation POLITICS Employer First Name MARK Last Name/Organization Name SMITH Address 210 STERLING POLITICS City HENDERS and VILLE	LI CARN ASIEM. #204 State Zip Code 370; Middle Name P.	Primary Election Runoff (Local Election Runoff (Local Election S/29/3 Contribution Received For: Primary Election Runoff (Local Election Date of Contribution	General Election S Only) Aggregate S Only) Amount of General Election Gonly) Aggregate	This Election Contribution
Last Name/Organization Name SUM NER COUNTY REPUP Address 110 GLAN CY ST. City GODDLETTSVILLE Occupation POLITICS Employer First Name MARK Last Name/Organization Name SM 1TH Address 210 STERLING POLITY City HENDERS ANVILLE Occupation Employer	LI CARN ASIEM. #204 State Zip Code 370; Middle Name P.	Primary Election Runoff (Local Election Runoff (Local Election Runoff (Local Election Primary Election Runoff (Local Election Date of Contribution	General Election S Only) Aggregate Amount of General Election General Election Aggregate Aggregate Aggregate	This Election Contribution This Election
Last Name/Organization Name SUM NER COUNTY REPUP Address 110 GLAN CY ST. City GOOD LETTSVILLE Occupation POLITICS Employer First Name MARK Last Name/Organization Name SMITH Address 210 STERLING POLITY City HENDERS ANVILLE Occupation	State Zip Code 370; Middle Name P. Zip Code 3707	Primary Election Runoff (Local Election Runoff (Local Election Runoff (Local Election Primary Election Runoff (Local Election Primary Election Date of Contribution 9/13/a	General Election S Only) Aggregate Amount of General Election General Election Aggregate Aggregate Aggregate	This Election Contribution This Election

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE	166	PETERSON		2. REPORT COVER	
			·		TO: 3-30-20 Amount:
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT					Amount \$2,100 00
4. COMPLETE THE APPROPRIATE ITEMS FOR E				100 from any contributor)
First Name JEFFREY	Middle Nan	ne ${\mathcal T}.$	Contribution Received For:		Amount of Contribution
Last Name/Organization Name COKER			Primary Election	General Election	\$25000
Address 124 DALTON CIR			Runoff (Local Election	1 430	
City HENDERSONVILLE	State	Zip Code 37075	Date of Contribution		Aggregate This Election
Conunction			ala	3/2020	\$ 250 00
INSURANCE Employer SELF			7/2	3/ 2030	250
SELF					
First Name	Middle Nan	ne	Contribution Received For:		Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address			Runoff (Local Election:	s Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
First Name	Middle Nam	e	Contribution Received For:	· · · · · · · · · · · · · · · · · · ·	Amount of Contribution
Last Name/Organization Name	<u> </u>		Primary Election	General Election	
				i	
Address			Runoff (Local Elections	Only)	
Address	State	Ziρ Code	Runoff (Local Elections Date of Contribution	s Only)	Aggregate This Election
	State	Zip Code		s Only)	Aggregate This Election
City Occupation	State	Zip Code		s Only)	Aggregate This Election
Occupation Employer			Date of Contribution	s Only)	
City Occupation Employer First Name	State State Middle Name		Date of Contribution Contribution Received For:	o Only)	Aggregate This Election Amount of Contribution
City Occupation Employer First Name			Date of Contribution	General Election	
City Occupation Employer First Name			Date of Contribution Contribution Received For:	General Election	
City Occupation Employer First Name Last Name/Organization Name			Date of Contribution Contribution Received For:	General Election	
City Occupation Employer First Name Last Name/Organization Name Address City	Middle Name	e	Date of Contribution Contribution Received For: Primary Election	General Election	Amount of Contribution
City Occupation Employer First Name Last Name/Organization Name Address	Middle Name	e	Date of Contribution Contribution Received For: Primary Election	General Election	Amount of Contribution

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR C	OMMITTEE				A DEDORT COL	
		LEE	E PETE	rson	2. REPORT COVE FROM: 7-1-20	TO: # 20520
3. TOTAL ITEMIZED IN-KIND C	ONTRIBITIONS				1 /-(20	TO: 9-30-20 Amount #
4. COMPLETE THE APPROPRIATE	ITEMS FOR EAC	CH ITEMIZE	D IN-KIND CONTRI	: (enter \$0 if first itemized page	3)	1 17 ()
[=,						ntributor during the period)
DRIAN		Middle Name		In-Kind Contribution Receive	General Election	Value of In-Kind Contribution
Last Name/Organization Name STUKW C	VO V			Runoff (Local Election		\$459.84
Address 234 Lake 7	TERROCE	De	2.115			Aggregate this Election
Address 234 LAKE 7 City HENDERSONVILL Occupation	15	State .	Zip Code 37075	Description of In-Kind Contribution	-13-2020	Aggregate this Election \$459.84
	Employer	7//	3 (6 ()	4	T_{α}	
CFP	UB	2		TOEC	REAM TRU	ICK
First Name	,	Middle Name		In-Kind Contribution Received	f For:	Value of In-Kind Contribution
Last Name/Organization Name				Primary Election	General Election	
Address				Runoff (Local Election	s Only)	
				Date of in-Kind Contribution		Aggregate this Election
City	s	State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer	······································	· · · · · · · · · · · · · · · · · · ·	1		
First Name	irst Name Middle Name				For:	Value of In-Kind Contribution
Last Name/Organization Name				1	General Election	
Address				Runoff (Local Elections Date of In-Kind Contribution	s Only)	
City	10	tate	7: 0.1			Aggregate this Election
Occupation		iale	Zip Code	Description of In-Kind Contribution		
- 	Employer					
First Name	i M	liddle Name		In Visal Contribution D		
ast Name/Organization Name		induic Hallie		In-Kind Contribution Received Primary Election	For: General Election	Value of In-Kind Contribution
and the conganization reality				Runoff (Local Elections	İ	
Address	-			Date of in-Kind Contribution		Aggregate this Election
City	Sta	ate 2	Zip Code	Description of In-Kind Contribution		
Occupation	Employer			*		
irst Name	Mid	idie Name		In-Kind Contribution Received	For:	/alue of In-Kind Contribution
ast Name/Organization Name	<u> </u>			_	General Election	- 333
ddress				Runoff (Local Elections	Only)	
ty		<u> </u>		Date of In-Kind Contribution	1	ggregate this Election
<u> </u>	Stati	te Zi	p Code	Description of In-Kind Contribution		
ccupation	Employer					
. TOTAL ITEMIZED IN-KIND CO	NTRIBUTIONS					
(Carry forward to item 3. of next page if ac (If this is the last page of in-kind contributi	iditional pages of this	s form are us st be shown i	ed.) in item 22b. of summary.))		\$ 459.84
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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	1 0	,	2. REPORT COVE	
	LEE TETERSON	J	FROM: 7-1-20	TO: 9-30-20
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT			* '	#0
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100	to any payee during the pe	eriod)
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name ASAP PAI	NTING]		
Address 116 IMPERIAL BL	√ ∆.	PRINTIN	16	\$ 186.97
HENDERSONVILLE	State Zip Code TN 37075	1,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7	• 4	
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name SOUTHERN PROMOTI	DNS, INC.	1		
Address 146 VOLUNTEER DI	E. WHIT B			\$322,29
City HENDERSON VILLE	State Zip Code TN 37075	T-SHIR	TS	
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name M.R. SIGN MAN	<u> </u>			
Address 129 CommERCE	DRIVE			\$ 1.059.73
CITY HENDERSONVILLE	State Zip Code TN 37075	Ymro Si	ens	1,059.73
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name M.A. SI & W. M.A.W.				
Address 129 Comm ERCE	DAIVE	MAGNETS	\$	\$ 500.09
CHY HERDERSONVILLE	State Zip Code 3 70 75	MAGNETS S	16NS	200.01
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name MR. SIGN MAN				#
Address 129 Commercé	DRIVE	YARD SI	ENS	#382.38
HENDERSONVILLE	State	,		
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 (If this is the last page of expenditures, this amount must	of this form are used.) be shown in item 19b. of summary.)			\$2,451.46

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RDA 1159

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OF	R COMMITTEE						Ī	2. F	REPORT (COVE	RING	THE PERIO	D
		LEE	\mathcal{C}	I ETER	SON			FRC			TO		
3. COMPLETE THE APPROP	PRIATE ITEMS F	OR EACH	TEMIZ	ED LOAN	(loans totaling r	nore than \$1(00 from any si	ource o	turing the pe	riod)			
Complete the Following for the So	ource of the Loan												
First Name	irst Name Middle Name				Outstanding Loan Balance Loans (Beginning of Period) Received			Loan Payments		Ou	Outstanding Loan Balance (End of Period)		
Last Name/Organization Name					į								
Address			Loan Receiv	ed For:			\neg	Date of Loa	n		····		
City	State	1 -1 -1			y Election (Local Elections	Genera Only)	al Election						
	List All Endor	sers or Guara	intors fo	or Above Loa	n (If more spa	ce is neede	ed please at	tach a	page)				
First Name		Middle Name		-	First Name				7 - 3 - 7	Middl	e Name		
Last Name/Organization Name			···	, -	Last Name/Org	janization Na	me			.L			
Address		<u></u>			Address							 	
City	** 	State	Zip Co	ode	City					State		Zip Code	
Amount Guaranteed Outstanding					Amount Guara	iteed Outstar	nding			<u> </u>			
First Name	First Name Middle Name				First Name Middle Name								
Last Name/Organization Name					Last Name/Organization Name								
Address					Address								
City		State	Zip Co	de	City State Zip Code				Zip Code	<u></u>			
Amount Guaranteed Outstanding				-	Amount Guaran	teed Outstan	ding			·			
First Name		Middle Name		. <u></u>	First Name					Middl	e Name		
Last Name/Organization Name					Last Name/Organization Name								
Address	-				Address							······································	
City		State	Zip Cod	ie	City	 				State		Zip Code	
Amount Guaranteed Outstanding		<u> </u>			Amount Guaran	teed Outstand	ding				1		
First Name		Middle Name			First Name Middle Name								
Last Name/Organization Name			<u>. </u>		Last Name/Orga	nization Nan	ne		i			<u> </u>	\dashv
Address		. <u>.</u> .	**		Address								\dashv
City		State	Zip Cod	le	City					State		Zip Code	\dashv
Amount Guaranteed Outstanding					Amount Guarant	eed Outstand	ling						\dashv
Totals for all Loans (complete (Total loans received should also be shi (Total loan payments should also be shi (Total outstanding loan balance should a	own in item 16. on su own in item 20. on su	mmary page.)	•		Outstanding Loa (Beginning of		Loans Received	1	Loan Paymer			anding Loan Bal End of Period)	ance

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR CO	MMITTEE /	~ P.	TERSON	2. REPORT COV	ERING THE PE	RIOD
3. COMPLETE THE APPROPRIA	TE ITEMS FOR FAC	HITEMIZED		FROM: 7-/-	20 TO:	9-30-20
OBLIGATION (obligations totalin person/vendor at the end of the	ig more than \$100 ov	ved to any	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Na	ıme				
Last Name/Business Name			-			
Address		······································	_			
City	State	Zip Code	-			
Description of Obligation			<u> </u>			
First Name	Middle Na	me		· · · · · · · · · · · · · · · · · · ·		
Last Name/Business Name						
Address			-			
City	State	Zip Code	_			
Description of Obligation						
•						
First Name	Middle Nar	ne				
Last Name/Business Name	· · · · · · · · · · · · · · · · · · ·		7 /			
Address			1			
City	State	Zip Code	7			
Description of Obligation		·				
First Name	Middle Nan	ne				
Last Name/Business Name		· · · · · · · · · · · · · · · · · · ·	-			
Address		<u> </u>				
City	State	Zip Code	-			
Description of Obligation						
First Name	Middle Nam	e				
Last Name/Business Name					ļ	
Address						1
City	State	Zip Code				
Description of Obligation				<u> </u>		
. TOTALS						
(Total from Outstanding Balance - (End o in Item 23b. on summary page.)	of Period) column must a	also be shown				
R .						