CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

	U - = _ 					
1. DATE OF REPORT		NDIDATE OR CO	MMITTEE			
10-11-2020	James	Tone) 1/			
2.b. IF COMMITTEE, NAME OF CANDIDATE		- -	_	3. ELECTION DA		
				11-0	3-20	20
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Ph	one
1010 Edwards Lar	• • • • • • • • • • • • • • • • • • • •	T ha	N	37148	1015	5095461
4.b. CANDIDATE'S HOME ADDRESS (if different	<u> </u>	164 1	<u></u>	<u> </u>	<u> </u>	<u> </u>
Street or Rural Route	City		State	Zip Code	Ph	none
	,	<u> </u>	- Dollare	TDEACURES !	. h = - "	data
5. OFFICE SOUGHT (include district number, if	7.1	6. NAME OF	F POLITICAL`	TREASURER (may	, pe candit	Jale)
Alderman for City of	tortland, TN	179	iny (tank)		
7. CATEGORY OR REPORT (Check one)					-	VEAD SAID
FIRST SECOND THIRD QUARTER QUARTER	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENT		YEAR-END PPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING	DATE OF REPO	ORTING PERIOD		
07.01-2020		29	30 - 20	120		
9. (Check one)						
a. This campaign is exempt from detaile	d disclosure because	contributions	(including in-ki	nd) received total \$	31,000 or l	ess AND expendi-
tures total \$1,000 or less for this repo						
b. This campaign is required to file a de	tailed financial disclo	sure because o	ontributions (i	ncluding in-kind) re	ceived tota	al more than \$1,000
and/or expenditures total more than \$	THOO I OF THIS REPORT	пу ролой.				····
I/we do solemnly swear or affirm that the ir accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other nor	ons and expenditures swear or affirm that i	s required to be no campaign co	reported by the intributions ha	he candidate comm ive been expended	ittee by th	e Campaign
	10-11-20)	(p.H.	- KA)	10-11-20
Signature of candidate	date	_1	signature	of political treasure	r	date
11. WITNESS SIGNATURE						
Books all Ta.	10-11-20					
signature of witness	date	_	sians	ature of witness		date
Organization of History			J.g/it		·····	
12. SUMMARY		FILED	m1.5	æ 1	_	
a. BALANCE ON HAND LAST REPORT		۲۱۲۳۰	РΜ	\$ 84.6	<u>U</u>	
		. 4 0	<i>ร</i> บร <i>ิ</i> บ	1616 4	0	
b. TOTAL RECEIPTS THIS PERIOD		OCT 13	LU	* 1915.	10	
c. TOTAL DISBURSEMENTS THIS PERIOD		MANERC	OUNTY	s 1515.	70	
	-	SUMPLE CO	MMISSTO	\$ 1515.		011 100
d. BALANCE ON HAND (12.a. plus 12.b. t	minus 12.c.)			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	<u>84.60</u>
				- · · · · · · · · · · · · · · · · · · ·	•	(X)
e. TOTAL LOANS OUTSTANDING			***************************************	************************	\$ <u></u>	Y
f. TOTAL OBLIGATIONS OUTSTANDING .				*****	\$ —	Ø
i. TO TAEODEIGATIONS COTOTANDING	(## 4#				🕶 ——	(



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
James W. Tonpy	FROM: 7-1-20 TO: 05-30-20
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$
b. Itemized Contributions (over \$100 from each source this period)	"" \$ 1212.40
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>\$</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>Ø</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>1515.40</u>
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)
Candidate Cords 5 32.5	0
<u> </u>	
\$	<u></u>
<u> </u>	
\$	
Total of Expenditures (\$100 or less each payee)	\$ 32,50
b. Itemized Expenditures (Over \$100 each payee this period)	110000
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	s <u>1515.40</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	s <u>ISI5.40</u>
22.IN-KIND CONTRIBUTIONS	
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	o.)\$
23. OBLIGATIONS	,
a. Unitemized Obligations Outstanding (\$100 or less each) b. Itemized Obligations Outstanding (Over \$100 each)	\$
b. Itemized Obligations Outstanding (Over \$100 each)	\$
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i iter	n 12.f.)\$

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Page _____ of ____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTE	<u> </u>		2	REPORT COVER			
				FROM:	TO:		
			DE ()		Amount		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT							
4. COMPLETE THE APPROPRIATE ITEMS FOR EA							
First Name	Middle Name	е	Contribution Received For	:	Amount of Contribution		
Last Name/Organization Name	l		Primary Election				
Address			Runoff (Local Election	as Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election		
City	Ottalo	aposse			7.5552		
Occupation							
-			4				
Employer							
	1		0 131 45 - Destinat		Amount of Contribution		
First Name	Middle Nan	ne	Contribution Received F	or:	Amount of Contribution		
Last Name/Organization Name	1		Primary Election	General Election			
		· · · · · ·					
Address			Runoff (Local Election				
City	State	Zip Code	Date of Contribution		Aggregate This Election		
oly .							
Occupation							
F1			4				
Employer							
First Name	Middle Nan		Contribution Received I	For	Amount of Contribution		
First reme			Contribution (Cocived)	· 01.	7 and an an an analysis		
Last Name/Organization Name	_4		Primary Election	General Election			
Address			Runoff (Local Election	ons Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election		
	<u> </u>						
Occupation							
Employer	 	···					
First Name	Middle Nan	ne	Contribution Received Fo	DF.	Amount of Contribution		
Last Name/Organization Name			Primary Election	General Election			
			Runoff (Local Election	one Only)			
Address				ons only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election		
Occupation	1		-				
Souperior							
Employer			1				
5. TOTAL ITEMIZED CONTRIBUTIONS							
(Carry forward to item 3. of next page if additional page	s of this form	are used.)					
(If this is the last page of contributions, this amount mu-	si de snown ir	ritem 150. of summary.)					

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR C	OMMITTEE		2	REPORT COVERI			
				FROM:	TO:		
A TOTAL ITEMIZED IN 1995 COVE	<u> </u>	Amount					
3. TOTAL ITEMIZED IN-KIND CON					tributer during the esting!		
4. COMPLETE THE APPROPRIATE ITE	MS FOR EACH ITEM	ZED IN-KIND CONTRIBL			· · · · · · · · · · · · · · · · · · ·		
First Name	Middle Nar	me	In-Kind Contribution Receive Primary Election	ed For: D 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	State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer	· 	1				
	ļ						
First Name	diddle Na	me	In-Kind Contribution Receiv		Value of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Election				
Address			Date of In-Kind Contribution	9(87)	Aggregate this Election		
, words	<u>,</u>						
City	State	Zip Code	Description of In-Kind Contribution	ı			
Occupation	Employer		7				
			<u></u>	·			
First Name	Middle Na	me	In-Kind Contribution Receiv	ved For: General Election	Value of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Electio	ns Only)			
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution	1			
Occupation Employer			7				
		<u> </u>					
First Name	Middle Na	ime	In-Kind Contribution Recei		Value of In-Kind Contribution		
Last Name/Organization Name			Primary Election	☐ General Election			
			Runoff (Local Election	ons Only)	1		
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution	n			
Occupation	Employer	<u></u>	7				
First Name	Middle Na	une	In-Kind Contribution Rece		Value of In-Kind Contribution		
Last Name/Organization Name		·	Runoff (Local Election	<u>—</u>			
Address			Date of In-Kind Contribution	Cing)	Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution	1	1		
Occupation	Employer		-				
	,						
5. TOTAL ITEMIZED IN-KIND CO							
(Carry forward to item 3. of next page if a (If this is the last page of in-kind contribu			arv.)				
to and to allo that bage of all-kills continue	Total wife deligated the state of						

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER				
ames W. Tonew FROM: 7-1-					TO 09-30-20			
3. TOTAL ITEMIZED CAMPAIGN EXPENDITUI	Amount							
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)								
Firşt Name –	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Signs on the Chia	<u></u>		Corrugated S	1338.73				
Address A Stone hollow D	,	100)						
City	State	Zip Code						
Pushin	IX	Zip Code 78758						
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Bysiness Name . VISta Wint	<u>L</u>		T-8hirts on		4 287.94			
PO. Bux e42882			Car magnet	rS				
Buston	State	Zip Code 02284-2882	· ·					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure			
Leet Noon (Durings Noon			_					
Lasi Name/Business Name Banners on the Ches		Fabric Bar	nor	\$116.23				
11525A Stone hollow	<u>Dr. S</u>	F100						
Caty Austin	State	Zip Code 78758						
First Name	Middle Name	•	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name SignS			Billboord	\$740.00				
Address 993 Southerland Drive			Dulowic	1				
Moshville	State TN	Zip Code 31207						
First Name	Middle Name	2	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						
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages)	s of this form a	re used.)			\$148290			
(If this is the last page of expenditures, this amount mus					1 1			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE C	R COMMITTEE							2. REI	PORT C	OVERII	NG T	HE PERIOD
							F	ROM	:		TO:	
3. COMPLETE THE APPRO	PRIATE ITEMS F	OR EACH IT	ГЕМІХ	ED LOAN (I	oans totaling r	nore than \$100	from any sou	rce duri	ng the peri	od)		
Complete the Following for the S	ource of the Loan											
First Name	Middle Nam	e		Outstanding L (Beginning o		Loans Received	d	Loan Paymen	ts			Loan Balance Period)
Last Name/Organization Name			,. <u>,. ,. ,</u>									
Address				Loan Receive	ed For:	d For: Date of Loan						· · · · · · · · · · · · · · · · · · ·
City	State	Zip Code		Primary	Election Local Elections	General	Election					
	List All Endor	sers or Guara	ntors fo	<u> </u>			l please atta	ach a p	age)			
First Name		Middle Name			First Name		<u>'</u>			Middle N	Name	
Last Name/Organization Name		<u> </u>			Last Name/O	ganization Nan	ne		,			
Address			 		Address							, , , ,
City		State	Zip C	ode	City		.		<u></u>	State		Zip Code
Amount Guaranteed Outstanding	Amount Guaranteed Outstanding				Amount Guara	anteed Outstand	ding					
First Name Middle Name			· · · · · · · · · · · · · · · · · · ·	First Name Middle Name								
Last Name/Organization Name				Last Name/Organization Name								
Address					Address			- •		-		
City	•	State	Zip C	Code	City State Z				Zip Code			
Amount Guaranteed Outstanding				•	Amount Guar	anteed Outstan	ding					
First Name Middle Name					First Name					Middle	Name	!
Last Name/Organization Name				·	Last Name/O	rganization Nar	ne					
Address					Address					···············		······································
City	· · · · · · · · · · · · · · · · · · ·	State	Zip C	Code	City					State		Zip Code
Amount Guaranteed Outstanding			•		Amount Guar	anteed Outstan	ding			•		
First Name Middle Name				First Name Middle Name								
Last Name/Organization Name	 	ı		<u> </u>	Last Name/0	rganization Nar	me					
Address					Address							-
City	· · · · · · · · · · · · · · · · · · ·	State	Zip C	Code	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guar	anteed Outstan	nding					
4. Totals for all Loans (comple (Total loans received should also b	e shown in item 16. on	summary page	.)			Loan Balance g of Period)	Loans Receiv		Loa Paym			tanding Loan Balance (End of Period)
(Total loan payments should also b (Total outstanding loan balance should	e shown in item 20. on uld also be shown in ite	summary page in 12.e. on front	.) page.)									



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD						
				FROM:	TO:		
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 Nar						
First Panie	MIDUIE Nar	ne					
Last Name/Business Name				-	: :		
Address							
City	State	Zip Code	1				
Description of Obligation	•	•					
First Name	Middle Nar	ne					
Last Name/Business Name	1		+				
Address			-		:		
City	State	Zip Code	1				
Description of Obligation							
First Name	Middle Nar	ne					
Last Name/Business Name				,			
Address	Address						
City	State	Zip Code					
Description of Obligation							
First Name	Middle Nar	ne					
Last Name/Business Name	<u> </u>				,		
Address			-				
City	State	Zip Code					
Description of Obligation	<u> </u>	<u> </u>	<u>-I., , , , , , , , , , , , , , , , , , , </u>	<u> </u>	L.		
First Name	Middle Nar	ne					
Last Name/Business Name							
Address			_				
City	State	Zip Code	_				
	CIBIC	Zip code					
Description of Obligation		·					
4. TOTALS	-1	t also de la constantina					
(Total from Outstanding Balance - {End of Period) of in item 23b. on summary page.)	column mus	t also de shown					

20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		SS-1127	(Rev.	4/02)
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