CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAMEOFC	ANDIDATE OR C	OMMITTEE	-	 	
10-26-2020	LE	E PETE	RODA			
2.b. IF COMMITTEE, NAME OF CANDIDATE	•			3. ELECTION DATE		
				NOV 3.	2020	
4.a. CAMPAIGN ADDRESS AND PHONE				•		
Street or Rural Route 248 LAKE TORFACE DR.	City HET DER SI		State	Zip Code	Phone 615 -	
4.b. CANDIDATE'S HOME ADDRESS (if different	0.7.	Price	7N	21015	822-5420	
Street or Rural Route	City		State	Zip Code	Phone	
5. OFFICE SOUGHT (include district number, i	OFFICE SOUGHT (include district number, if applicable) NAME OF					
ALDERMAN - WARD	2	BRA	ocey (J. NIEMIEC		
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD				RTING PERIOD		
9. (Check one)			0-24-0	0 50		
a. This campaign is exempt from detaile tures total \$1,000 or less for this report. b. This campaign is required to file a de and/or expenditures total more than \$1.000.	orting period. (Comp stailed financial disck	olete items 12d., osure because d	12e. and 12f.)			
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 nor	ons and expenditure swear or affirm that	s required to be no campaign or	reported by the	e candidate committee /e been expended for t	by the Campaign	
1 Le Vitara	10-26-21	170	Δ	gr-	10 - 2/ 2:	
signature of candidate	/0-26-∂./		signature o	of political treasurer		
Signature of carriers	uute		signature (political treasurer	Cate	
11. WITNESS SIGNATURE						
l chi			l.	-9n '	(= =2(= 2 = 2 =	
stace benne	10-26-20	ي ان	Noc	is bernier	10-26-202	
signature of witness	date		signa	ture of witness	date	
12. SUMMARY		· ·				
	FIL	ED PM		\$ 3550.6	4	
a. BALANCE ON HAND LAST REPORT	МА	- IAI				
b. TOTAL RECEIPTS THIS PERIOD	nct (2 7 2020		.s 200. a	•	
c. TOTAL DISBURSEMENTS THIS PERIOD		TAILO		, 1333.5	7	
c. TOTAL DISBURSEMENTS THIS PERIOD	SUMNE	COMMISSION	8		2417	
d. BALANCE ON HAND (12.a. plus 12.b. r	minus 12.E)				s <u> 2,711.01</u>	
TOTAL . D					5	
f. TOTAL OBLIGATIONS OUTSTANDING					-0-	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	EE	PETERSO	1	FROM: 10 ~ (RING THE PERIOD
	~ .	1 ETERS	٠,٢	FRON. 10 ~ 1	TO: (0 - 24
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT					\$ 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EA			ontributions totaling more than \$ Contribution Received For.	100 from any contributor	
First Name	First Name Middle Name				Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address			Runoff (Local Elections Only)		
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
First Name	Middle Nam	ne	Contribution Received For		Amount of Contribution
Last Name/Organization Name	<u> </u>		Primary Election	General Election	
Address			Runoff (Local Election	ns Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation	1	•			
Employer					
	,				
First Name	Middle Name	e	Contribution Received For		Amount of Contribution
Last Name/Organization Name		Primary Election	General Election		
Address	Address		Runoff (Local Election	ns Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
City Occupation	State	Zip Code	Date of Contribution		Aggregate This Election
	State	Zip Code	Date of Contribution	, , , , , , , , , , , , , , , , , , ,	Aggregate This Election
Occupation	State Middle Nam		Date of Contribution Contribution Received For:		Aggregate This Election Amount of Contribution
Occupation Employer			Contribution Received For:	General Election	
Occupation Employer First Name			Contribution Received For:		
Occupation Employer First Name Last Name/Organization Name			Contribution Received For.		
Occupation Employer First Name Last Name/Organization Name Address	Middle Nam	e	Contribution Received For: Primary Election Runoff (Local Election		Amount of Contribution
Occupation Employer First Name Last Name/Organization Name Address City	Middle Nam	e	Contribution Received For: Primary Election Runoff (Local Election		Amount of Contribution

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR	COMMITTEE	EE!	PETERSO	ر,	FROM: 10 ~	TO: 10 ~ 24		
2 TOTAL ITEMATER IN LUMB			-			Amount & O		
 TOTAL ITEMIZED IN-KIND COMPLETE THE APPROPRIA 	·			.	· · · · · · · · · · · · · · · · · · ·	ntributor during the period)		
First Name		dle Name	,,,,,,,,,,	In-Kind Contribution Receive		Value of In-Kind Contribution		
			☐ Primary Election ☐		Table 6. IV., and Garanager,			
Last Name/Organization Name				Runoff (Local Election				
Address				Date of In-Kind Contribution Aggregate this Election				
City	State	e Zip	Code	Description of In-Kind Contribution				
Occupation	Employer		, - 					
First Name	Midd	die Name		In-Kind Contribution Receive		Value of In-Kind Contribution		
Last Name/Organization Name				Primary Election General Election Runoff (Local Elections Only)				
Address				Date of In-Kind Contribution	is Olly)	Aggregate this Election		
City	State	te Zip	Code	Description of In-Kind Contribution		<u> </u>		
Occupation	Employer							
First Name	Mide	dle Name		In-Kind Contribution Receive	_	Value of In-Kind Contribution		
Last Name/Organization Name		1 = '	General Election					
Address		Date of In-Kind Contribution	ns Only)	Aggregate this Election				
City	State	to 7 in	Code	Description of In-Kind Contribution		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Occupation	Employer	- 1 Zip		Description of In-King Contribution				
Оссирация	criptoya							
First Name	Mido	Middle Name		In-Kind Contribution Receive	Value of In-Kind Contribution			
Last Name/Organization Name		☐ Primary Election ☐ ☐ Runoff (Local Election	General Election					
Address				Date of In-Kind Contribution	Aggregate this Election			
City	State	te Zip	Code	Description of Irr-Kind Contribution		<u> </u>		
Occupation	Employer	<u> </u>						
First Name	Midd	de Name		In-Kind Contribution Receive	ed For: General Election	Value of In-Kind Contribution		
Last Name/Organization Name	<u> </u>	·		Runoff (Local Election				
Address		Date of In-Kind Contribution	o only	Aggregate this Election				
City	State	e Zip	Code	Description of In-Kind Contribution		<u> </u>		
Occupation	Employer	I	, <u></u>					
5. TOTAL ITEMIZED IN-KIND	CONTRIBUTIONS							
(Carry forward to item 3. of next page (If this is the last page of in-kind cor	ge if additional pages of this)		* o		
SS-1128 (Rev. 2/06)				Pag	e of	RDA 1159		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE	LEE PE	mend	2. REPORT COVERING THE PERIOD FROM: // TO: // 2 4/			
2 TOTAL ITEMIZED CAMPAICN EVOCADITI	Amount					
TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)						
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name	<u> </u>		<u> </u>			
Last Name/Business Name ASAP PRINTING Address	<u>3</u>	PRINTING	f/20.05			
Address 116 IMPERIAL City HENDERSON VULE	State Zip Code		š			
HENDERSON VILLE	7W 37	075				
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name	<u> </u>					
MR. SIGN MAN	Da .c		\$152.95			
City 129 COMM ENCE	DRIVE State Zip Code	MARO S	16NS			
HENDERSONVILLE	77 37	075				
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name .						
Address Address	PIKE		VAILERS \$427.38			
City ELM HILL	Slate Zip Code		VAILIENS 1427.30			
NAFOILLE	m 37	210 18181				
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name	•		 			
Address		POSTAGE	1633,19			
City	Stale Zip Code	TOTAGE	(22,11			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name	<u>*</u>					
Address						
City	State Zip Code					
First Name	Constant Street	0				
	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name						
Address]			
City	State Zip Code					
5. TOTAL ITEMIZED EXPENDITURES	I		1			
(Carry forward to item 3, of next page if additional pages (If this is the last page of expenditures, this amount mus		f summary.)	\$1333.57			
The state of the s						

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD					ING THE PERIOD
LEE PETERSON					1	FROM: (0 -	1	TO: 10-24		
3. COMPLETE THE APPRO	PRIATE ITEMS	FOR EACH I	ITEMIZ	ED LOAN	loans totaling r	nore than \$10	00 from any so	urce during the p	eriod)	
Complete the Following for the S	Source of the Loan									. ,,
First Name Middle Name Ou			Outstanding I (Beginning				tanding Loan Balance (End of Period)			
Last Name/Organization Name									1	
Address Loan Receive						Date of Lo	an an			
City	State	Zip Code		Primary Election General El Runoff (Local Elections Only)			al Election			
	List All Endo	rsers or Guar	antors fo	or Above Loa	n (If more spa	ce is neede	ed please att	ach a nane\		
First Name		Middle Name			First Name			uon a pago)	Middle	Name
Last Name/Organization Name				<u> </u>	Last Name/Or	ganization Na	ome		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Address				y	Address					
City		State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding				Amount Guara	nteed Outsta	nding		<u> </u>		
First Name Middle Name				First Name Middle Name						
Last Name/Organization Name			-	Last Name/Organization Name						
Address				Address						
City	ty State Zip Code			City				State	Zip Code	
Amount Guaranteed Outstanding			•		Amount Guara	nteed Outsta	nding			·
First Name		Middle Name	9		First Name			•	Middle	Name
Last Name/Organization Name		<u> </u>			Last Name/On	ganization Na	me		<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>
Address					Address					
City		State	Zip Co	ode	City			· · · · · · · · · · · · · · · · · · ·	State	Zip Code
Amount Guaranteed Outstanding		· L			Amount Guara	nteed Outstar	nding		<u> </u>	<u>. </u>
First Name Middle Name				First Name Middle Name						
Last Name/Organization Name	· .				Last Name/Org	anization Na	me			
Address					Address					
City		State	Zip Co	ode	City				State	Zip Code
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 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				Outstanding Lo (Beginning o		Loans Received	Loa d Paym		Outstanding Loan Balance (End of Period)	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE LEE PETERS ON			2. REPORT COVERING THE PERIOD			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED C			Outstanding Balance	FROM: 10 -1 Debt Incurred	- Zo TO: Payments	10-24-20 Outstanding Balance
OBLIGATION (obligations totaling more that person/vendor at the end of the reporting p	DBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			This Period	This Period	(End of Period)
First Name	Middle Name					
Last Name/Business Name	<u> </u>		1			
Address			1			
City	State	Zip Code	-			
Description of Obligation		· · · · · · · · · · · · · · · · · · ·				<u></u>
First Name	First Name Middle Name					
Last Name/Business Name			1			
Address			-			
City	State	Zip Code				;
Description of Obligation		<u></u>			<u> </u>	<u> </u>
First Name	Middle Na	тө				
Last Name/Business Name			-			
Address			1			
City	State	Zip Code				
Description of Obligation		·I	1	<u> </u>		1
First Name	Middle Nar	ne				
Last Name/Business Name		-				
Address			-			
City	State	Zip Code	-			
Description of Obligation	<u> </u>	,	<u> </u>			
First Name	Middle Nam	ne			····	
Last Name/Business Name		-	-			
Address			†		į	
City	State	Zip Code				
Description of Obligation		<u>. </u>	<u> </u>	<u></u> <u> </u>	···	
TOTALS (Total from Outstanding Balance - (End of Period) c in item 23b. on summary page.)	olumn must	also be shown				
			<u> </u>			

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