CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF C	CANDIDATE OR C	OMMITTEE			
1-19-2023	6	E PETE	ERSON			
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code		615
248 LAKE TERRACE I		SONVILLE	TN	37075	822	- 5420
4.b. CANDIDATE'S HOME ADDRESS (if differe Street or Rural Route	nt than 4.a.) City		State	Zip Code	Phone	
5. OFFICE SOUGHT (include district number,	if applicable)			TREASURER (may be	candidate)	
ALDERMAN - WARL) 2	Bi	RADLE	Y J. NIE	EM 26	EC
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTAL DRTING PERIOD	YEAR SUPPLE	Control of the Contro
7-1-2022		O.D. ENDING		2023		
9. (Check one) a. This campaign is exempt from detaitures total \$1,000 or less for this reputation b. This campaign is required to file a dand/or expenditures total more than 10. I/we do solemnly swear or affirm that the accurate accounting of campaign contributed Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other not signature of candidate. 11. WITNESS SIGNATURE signature of witness	etailed financial discl \$1,000 for this repor- information containe ions and expenditure s swear or affirm that	plete items 12d., losure because of ting period. d in this campaigners required to be to a campaign or selection of the time.	gn financial discreported by the partibutions have federal internal	ncluding in-kind) receive sclosure report is true a se candidate committee we been expended for the	nd that this by the Cam ne personal	e than \$1,000 report is an
12. SUMMARY a. BALANCE ON HAND LAST REPORT				\$ _1520.07		
b. TOTAL RECEIPTS THIS PERIOD				38		
c. TOTAL DISBURSEMENTS THIS PERIOD				\$		
d. BALANCE ON HAND (12.a. plus 12.b.	minus 12.c.)	FILED	M	\$	152	0.45
e. TOTAL LOANS OUTSTANDING					-	0 -
f. TOTAL OBLIGATIONS OUTSTANDING	SUMN	IER COUNTY N COMMISSIO	N	\$		0 -

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERIN	G THE PERIOD
LEE PETERSON	FROM: 7-1-22 TO	1-15-23
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)	\$	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$_	-0-
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>.</u>	-0-
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>_</u>	, 38
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, gaso	oline)
\$		
\$		
\$		
\$		
\$		
\$		
\$		
\$		
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.)	\$_	1 15
20. LOAN REPAYMENTS MADE THIS PERIOD	\$_	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$_	-0-
22.IN-KIND CONTRIBUTIONS		1 7 27 1
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	o.)\$ _	-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 i iter		-0-



SS-1133 (Rev. 4/02)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE	. ~		1	2. REPORT COVER	RING THE PERIOD			
	LEE	PETER	502	FROM: 7-1-22	TO: 1-15-23			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBU	ITIONS FF	ROM PRECEDING	PAGE (enter \$0 if first itemized p	page)	Amount			
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITEM	IZED CONTRIBUTION	ON (contributions totaling more than	\$100 from any contributor)			
First Name	Middle Na	the state of the s	Contribution Received For:	Contribution Received For:				
Last Name/Organization Name			Primary Election	Primary Election General Election				
Address		Runoff (Local Election	ns Only)					
City	State	Zip Code	Date of Contribution	Date of Contribution				
Occupation		Sign of the						
Employer								
First Name	Middle Na	ame	Contribution Received For	:	Amount of Contribution			
Last Name/Organization Name			Primary Election	General Election				
Address	H. C.		Runoff (Local Election	ns Only)				
City	State	Zip Code	Date of Contribution	Date of Contribution				
Occupation								
Employer								
First Name	Middle Na	me	Contribution Received For	Contribution Received For: Primary Election General Election				
Last Name/Organization Name			Primary Election [
Address			Runoff (Local Election	ns Only)				
City	State	Zip Code	Date of Contribution	Date of Contribution				
Occupation								
Employer			-					
First Name	Middle Na	me	Contribution Received For:		Amount of Contribution			
Last Name/Organization Name								
Address				Runoff (Local Elections Only)				
City	State	Zip Code	Date of Contribution	ns Only)	Aggregate This Election			
Occupation	Julio		- Sale of Continuum		Aggregate This Election			
Employer								
single J vi								
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional page (If this is the last page of contributions, this amount mu					-0-			

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OF	RCOMMITTEE	FF	PETE	00-1	2. REPORT COVER					
		, , ,	1016	3010	FROM: 7-1-22	TO: 1-15-23				
3. TOTAL ITEMIZED IN-KIND	CONTRIBUTION	S FROM	PRECEDING PAGE	GE (enter \$0 if first itemized page	e)	,				
4. COMPLETE THE APPROPRIA	ATE ITEMS FOR EAC	CH ITEMI	ZED IN-KIND CONTI	RIBUTION (in-kind contributions totaling	more than \$100 from any co	ntributor during the period)				
First Name Middle Name			In-Kind Contribution Receive	d For: General Election	Value of In-Kind Contribution					
Last Name/Organization Name	Last Name/Organization Name		Runoff (Local Election							
Address			A 1 1	Date of In-Kind Contribution						
City	220	State Zip Code Description of In-		Description of In-Kind Contribution						
Occupation	Employer									
First Name		Middle Na	ame	In-Kind Contribution Receive	d For: ☐ General Election	Value of In-Kind Contribution				
Last Name/Organization Name				Runoff (Local Election						
Address		3.1		Date of In-Kind Contribution	Aggregate this Election					
City		State	Zip Code	Description of In-Kind Contribution	Description of In-Kind Contribution					
Occupation	Employer									
First Name		Middle Na	ame	In-Kind Contribution Receive	d For:	Value of In-Kind Contribution				
Last Name/Organization Name	•			Runoff (Local Election						
Address				Date of In-Kind Contribution		Aggregate this Election				
City		State Zip Code		Description of In-Kind Contribution						
Occupation	Employer									
First Name		Middle Na	ame	In-Kind Contribution Receive		Value of In-Kind Contribution				
Last Name/Organization Name				- Common - C	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)					
Address				Date of In-Kind Contribution		Aggregate this Election				
City		State	Zip Code	Description of In-Kind Contribution	Description of In-Kind Contribution					
Occupation	Employer	7								
First Name		Middle Nar	me	In-Kind Contribution Receive	ed For: General Election	Value of In-Kind Contribution				
Last Name/Organization Name	<u>.</u>			Runoff (Local Election						
Address			T T	Date of In-Kind Contribution		Aggregate this Election				
City		State	Zip Code	Description of In-Kind Contribution						
Occupation	Employer			- L - L						
		SUE PORTE			THE REAL PROPERTY AND ADDRESS.					
 TOTAL ITEMIZED IN-KIND (Carry forward to item 3. of next page (If this is the last page of in-kind co 	age if additional pages of	this form		mary.)		- 0-				
SS_1128 (Pay 2/06)				_		20020				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTE	100	0	- 1	2. REPORT COVER	
	LEE	PETERS	007	FROM: 7-1-22	
3. TOTAL ITEMIZED CAMPAIGN EXPENDI	TURES FRO	OM PRECEDING P	PAGE (enter \$0 if first itemized p	page)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR					riod)
First Name	Middle Na	AND RESIDENCE OF THE PARTY OF T	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name		100			
Address		1	- 1,1		
City	State	Zip Code			
First Name	Middle Na	nme	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address			_		
City	State	Zip Code			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address			_		
	Louis	T 75-0-1			
City	State	Zip Code	In the Control of the		
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name	Middle Nar	ne	Purpose of Expenditure	Purpose of Expenditure	
Last Name/Business Name					
Address	1.0				
City	State	Zip Code			
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pa (If this is the last page of expenditures, this amount next page) Total Tremize					^0-

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDAT		0								IG THE PERIOD
	LEE	F PET	ERS	600			FRO	OM: 7-1-2	2	1-15-23
3. COMPLETE THE APP	PROPRIATE ITEMS	OR EACH	ITEMIZ	ZED LOAN	(loans totaling mo	ore than \$100 fro	om any source	during the peri	od)	
Complete the Following for t	the Source of the Loan									
First Name	Middle Na	ne		Outstanding (Beginning	Loan Balance of Period)	Loans Received	100	nents		nding Loan Balance End of Period)
ast Name/Organization Name		Sec. 3		1						
Address				Loan Receiv	ed For:			Date of Loan		
City	State	Zip Code			☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)					
	List All Endo	rsers or Gua	arantors f	for Above Loa	n (If more space	e is needed p	lease attach	a page)		7 7 8 87 7
irst Name		Middle Nar	-		First Name				Middle Na	ame
ast Name/Organization Name					Last Name/Orga	anization Name				1 7 7
Address	1				Address					17.0
City		State	Zip C	Code	City				State	Zip Code
mount Guaranteed Outstanding)				Amount Guarant	teed Outstandin	g			
First Name		Middle Nar	ne		First Name			1675	Middle Name	
ast Name/Organization Name					Last Name/Organization Name					
Address					Address		60.7			
City	- 7 Ti	State	Zip C	Code	City				State	Zip Code
mount Guaranteed Outstanding	1			72	Amount Guarant	teed Outstandin	g		2.0	
First Name		Middle Nan	ne	100000000000000000000000000000000000000	First Name				Middle N	lame
ast Name/Organization Name	100	79.55			Last Name/Orga	anization Name				
Address		190			Address					
City		State	Zip C	Code	City				State	Zip Code
mount Guaranteed Outstanding	1				Amount Guarant	eed Outstanding	9			
irst Name		Middle Nan	ne		First Name				Middle N	ame
ast Name/Organization Name					Last Name/Orga	anization Name				- 1
address					Address					
City		State	Zip C	Code	City				State	Zip Code
mount Guaranteed Outstanding	1			J 2016	Amount Guarant	eed Outstanding	9			
Totals for all Loans (con (Total loans received should als					Outstanding Loa (Beginning of		Loans Received	Loan Payme		Outstanding Loan Bala (End of Period)
(Total loan payments should als (Total outstanding loan balance	so be shown in item 20. on	summary pag	e.)		1990			, ajino		(Cild of Feriod)

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE LEE PETERSON				2. REPORT COVERING THE PERIOD				
	LEE	IETE	3504		1-22 TO:	1-15-23		
COMPLETE THE APPROPRIATE ITI OBLIGATION (obligations totaling mo person/vendor at the end of the report	EMS FOR EAC re than \$100 ov	H ITEMIZED	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)		
First Name	Middle N	ame			The Same			
Last Name/Business Name			_					
Address						200		
City	State	Zip Code						
Description of Obligation								
First Name	Middle N	ame	T		- 9.0			
Last Name/Business Name								
Address								
City	State	Zip Code						
Description of Obligation						1.3.23		
First Name	Middle N	ame						
Last Name/Business Name						14.12		
Address								
City	State	Zip Code						
Description of Obligation				T MEN				
First Name	Middle N	ame						
Last Name/Business Name								
Address		7						
City	State	Zip Code						
Description of Obligation								
First Name	Middle N	ame						
Last Name/Business Name			_	-				
Address								
City	State	Zip Code						
Description of Obligation								
4. TOTALS			_			-		
(Total from Outstanding Balance - (End of Poin item 23b. on summary page.)	eriod) column mu	ist also be shown				. 0 -		