CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT		ANDIDATEORC			
	7,71	ANTH C	<u>, , , , , , , , , , , , , , , , , , , </u>		
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE	
JIM WATERS				17-3-	2020
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route	City		State	Zip Code	Phone
244 JOUTH BURN 9	DR HENI	ERSUNI	iille `lN	1, 37075	612-945-0414
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route			State	Zip Code	Phone
OFFICE SOUGHT (include district number, if	applicable)	6. NAME O	F POLITICAL T	REASURER (may be	e candidate)
ALDERMON WARD 6		Jim	1	2.5(≘	, vaa. ,
7. CATEGORY OR REPORT (Check on					
FIRST SECOND THIRD	FOURTH	PRE-	PRE-	MID-YEAR	YEAR-END
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY 8 h ENDINGE	GENERAL DATE OF REPOR	SUPPLEMENTAL TING DEPICE	SUPPLEMENTAL
July 1, 2020		S.E. P	- .	n 30, 7	-020
9. (Check one)				15 0 1	
a. This campaign is exempt from detaile	d disclosure becaus	se contributions (includina in-kin	d) received total \$1.0	000 or less AND expendi-
tures total \$1,000 or less for this repo	rting period. (Comp	olete items 12d.,	12e. and 12f.)	-, -, -, -, -, -, -, -, -, -, -, -, -, -	or of 1000 that experies
 b. This campaign is required to file a det and/or expenditures total more than \$ 	ailed financial disclo 1,000 for this repor	osure because c ting period.	ontributions (inc	cluding in-kind) receiv	ved total more than \$1,000
10. 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 non signature of candidate.	ons and expenditure swear or affirm that	s required to be no campaign co	reported by the ntributions have ederal internal in the second of the se	candidate committed been expended for	e by the Campaign
11. WITNESS SIGNATURE			· · · · · · · · · · · · · · · · · · ·		
1.3/11/2	_	_	/ " .	. /	
Signature of witness	0-8-70 date	<u>γ</u>	y glace signatu	v W ator re of witness	date
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT				s <u>893. 93</u>	
b. TOTAL RECEIPTS THIS PERIOD				\$ <u>2,050.00</u>	<u>)</u>
b. TOTAL RECEIPTS THIS PERIOD	FAM	ILED	PM	\$ 3,309.6	≟
d. BALANCE ON HAND (12,a. plus 12.b. m					
e. TOTAL LOANS OUTSTANDING	SUMP	ER COUNTY			\$ \$
, , , , , , , , , , , , , , , , , , , ,	ELECTIC	N COMMISSI	713		
f. TOTAL OBLIGATIONS OUTSTANDING	***************************************	·····	***********************	***************************************	\$

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD						
JIM WATERS	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)	s <u>50. 00</u>						
b. Itemized Contributions (over \$100 from each source this period)	\$ 2,000,55						
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 2,000.33						
16. LOANS RECEIVED THIS REPORTING PERIOD							
17. INTEREST RECEIVED THIS REPORTING PERIOD	1 260 22						
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$2,000.09						
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)						
Symmer County Election Comm 50, E	<u>90</u>						
TAS 9 10.0							
OFFICE DADIT \$ 283,23 0 /3 40 \ \$ 93.4	<u>b</u>						
ASAP Printing \$3911	<u>1</u>						
Clong Bros-Doorlangers Howers & 30,0	<u> </u>						
Me Signman Groupings Signs SHIRTS \$ 775.	18						
Transfor Supply-Sign to SIX ITES \$275.5	<u>16</u>						
+ony Mail Box-STAMPS = \$ 24.	19_						
CITYS9. Contex-ELECTRIAL SIGN - \$ 100.0							
TAKE'S PLACE - LUNCH FOR WORKERS	· 413.27						
Total of Expenditures (\$100 or less each payee)	\$2,896.39						
b. Itemized Expenditures (Over \$100 each payee this period)	720011						
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	13/						
20. LOAN REPAYMENTS MADE THIS PERIOD	321311						
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	30 <u>100110F</u>						
22.IN-KIND CONTRIBUTIONS	<i>b</i>						
a. Uniternized in-kind contributions (\$100 or less from each source this period)	<i>(U)</i>						
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.)\$							
23. OBLIGATIONS	ø,						
a. Unitemized Obligations Outstanding (\$100 or less each)	71)						
b. Itemized Obligations Outstanding (Over \$100 each)	, //						
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i ite	erri (2.1.)						

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE	2 REPORT COVER	
JIM WATERS		• TO: 9-30-20
		Amount
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PA		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION		
Fi AN Middle Name	Contribution Received For:	Amount of Contribution
John Evans Lock Name/Organization Name	Primary Election General Election	
Last Name/Organization Name	Control Contro	to/ 20
Address 155 amberland Dr.	Runoff (Local Elections Only)	18/00/
	Date of Contribution	Aggregate This Election
City Henousemville 977 359075	9-2-ZO	
Occupation		
Employer	\dashv	th/200
— 		#1000
First Name A S Middle Name	Contribution Received For:	Amount of Contribution
GEORGE C. PENCER	-	
Last Name/Organization Name	Primary Election General Election	
Address 1	Runoff (Local Elections Only)	#500
Address 1 of River CHASE		1,0
City Henderson ville State 7 Zip Code 57075	Date of Contribution	Aggregate This Election
	9-1-20	1
Occupation		
_	İ	· · · · ·
Employer	-	#5m
Employer		#500
Employer First Name Middle Name	Contribution Received For:	Amount of Contribution
First Name Middle Name		Amount of Contribution
First Name Middle Name	Contribution Received For:	Amount of Contribution
First Name Middle Name		Amount of Contribution
First Name Middle Name	Primary Election General Election Runoff (Local Elections Only)	#500°
First Name Middle Name	Primary Election General Election	Amount of Contribution #550 Aggregate This Election
First Name Middle Name	Primary Election General Election Runoff (Local Elections Only)	#500 €
First Name Last Name/Organization Name Last Name/Organization Name JAMNEK W. Republican Basy. Address PO BOX 2029 Components will E Start Zin Gode Start Zin Gode Start Zin Gode Start Zin Gode	Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election
First Name Last Name/Organization Name Last Name/Organization Name JAMNEK W. Republican Basy. Address PO BOX 2029 Components will E Start Zin Gode Start Zin Gode Start Zin Gode Start Zin Gode	Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election
First Name Last Name/Organization Name Last Name Last Name/Organization Name Last Name/Organization Name Last Name	Primary Election General Election Runoff (Local Elections Only) Date of Contribution	Aggregate This Election
First Name Last Name/Organization Name Last Name/Organization Name DAMNER W. Republican Basy. Address PD BOX 2029 Employed Letts will Employed Zincode State State Coccupation	Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election
First Name Last Name/Organization Name Last Name/Organization Name Address PO BOX 2029 Compation Employer Last Name/Organization Name Viiddle Name Compation Address PO BOX 2029 Compation Employer	Primary Election General Election Runoff (Local Elections Only) Date of Contribution	Aggregate This Election
First Name First Name Last Name/Organization Name Last Name/Organization Name Address Address BOX 2029 Consolens of the Solid State of the	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election
First Name Middle Name Middle Name	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election
First Name Last Name/Organization Name Last Name/Organization Name Last Name/Organization Name Last Name/Organization Name Middle Name Middle Name Middle Name	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election
First Name Last Name/Organization Name Last Name/Organization Name Last Name/Organization Name Last Name/Organization Name Address City State Middle Name	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Aggregate This Election Amount of Contribution
First Name Last Name/Organization Name Last Name/Organization Name Address Part Name Middle Name Last Name/Organization Name Address Address	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Aggregate This Election Amount of Contribution
First Name Last Name/Organization Name Address PD BOX 2029 Cocupation Employer First Name Last Name/Organization Name Address City State Middle Name	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Aggregate This Election Amount of Contribution
First Name Last Name/Organization Name Address PD BOX 2029 Cocupation Employer First Name Last Name/Organization Name Address City State Middle Name Address City State St	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution Aggregate This Election
First Name Last Name/Organization Name Address Discoupetion Employer First Name Last Name/Organization Name Address City State Middle Name Address City State Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution Aggregate This Election	
First Name Last Name/Organization Name Address Box 2029 Cocupation Employer First Name Last Name/Organization Name Address City Occupation Employer	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Date of Contribution	Aggregate This Election Aggregate This Election Amount of Contribution

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR C	OMMITTEE			REPORT COVERI	NO THE DEDICE			
Jim WATER	TO: 9-33-20							
On Wiles	Amount							
3. TOTAL ITEMIZED IN-KIND CON								
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)								
First Name	ed For.	Value of In-Kind Contribution						
			☐ Primary Election ☐	General Election	1//			
Last Name/Organization Name			Runoff (Local Election	ns Oniv)	(//)			
Address			Date of In-Kind Contribution Aggregate this Election					
O'L	la	7.04	B. S. d. d. la		\			
City State Zip Code			Description of In-Kind Contribution					
Occupation	Employer							
First Name	Aiddle N	ame	In-Kind Contribution Receiv		Value of In-Kind Contribution			
Last Name/Organization Name	!		Primary Election	General Election	\perp			
Last Harris Organization Harris			Runoff (Local Election	ns Only)				
Address			Date of In-Kind Contribution		Aggregate this dilection			
City	State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer		1		· •			
First Name	Middle N	ame	In-Kind Contribution Receiv	ed For:	Value of In-Kind Contribution			
			Primary Election	General Election	1			
Last Name/Organization Name			Runoff (Local Election	ns Only)				
Address		Date of In-Kind Contribution		Aggregate this aeption				
City	State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer		1					
2000			<u> </u>					
First Name	vliddle N	lame	In-Kind Contribution Receiv		Value of Irrikind Contribution			
Last Name/Organization Name	<u> </u>		Primary Election	General Election	1 1.			
•			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					
			<u> </u>					
First Name	Middle N	ame	In-Kind Contribution Rece		Value of te-Kind Contribution			
Last Name/Organization Name			Primary Election					
			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					٦ !			
E TOTAL ITEMSTO IN 1/130 001	ITOIDUTIONS	-			1			
 TOTAL ITEMIZED IN-KIND CON (Carry forward to item 3. of next page if ad (If this is the last page of in-kind contribution) 	ditional pages of this for	n are used.) shown in item 22b. of summar	y.)					
SS-1128 (Rev. 2/06)			· ·	3 0 (DDA 1150			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	ING THE PERIOD TO: 9~30-20							
	Amount							
3. 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 Nam	e	Purpose of Expenditure		Amount of Expenditure			
Last National All Promiting	L }		(gemproprique	Bonethipe				
Address 118 Imperuix Blun					# 20112			
City H'WILE	State (YV	Zip Code			#39112			
First Name	Middle Nam	de	Purpose of Expenditure		Amount of Expenditure			
Last Name Business Name NE S1971MM			CAMPMAn Ommpsian	916N2 4				
Address 129 Commerce ST			Jampaian .	SHIRTS	12 18			
chy HUILE .	State	Zip Code			#775			
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure			
Last Hames Business Name Supply	<u> </u>		5191 Pos	T AND	1			
Address 911 Center Point	סס	 .	Ties					
City	State	Zip Code	†	#27/10				
Muile	(1)	37075			A			
First Name	Middle Nam	ie	Purpose of Expenditure		Amount of Expenditure			
Last Mame/Business Name U.T.S. STORE			MAIL OU DOUR HM	115 4				
Address 170 E. WAINST.	Q-2		DONE HIM	MARIES				
H'WILE -	State	Zip Code 37075			\$1,454. S3			
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name	<u> </u>	A						
Address					,			
City	State	Zip Code						
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 of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)							

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OF	R COMMITTEE						2. RI	EPORT CO	VERIN	IG THE PERIOD
Jim Watens					FBO	FBOM 20 19-30-		9-30-20		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)										
Complete the Following for the So	ource of the Loan								А	
First Name	Middle Nar	ne		Outstanding L (Beginning o		Loans Received	Loa I Paym			nding Loan Balance End of Period)
Last Name/Organization Name					·			i	$\backslash \backslash$.)
Address				Loan Receive	kd For:			Date of Loan		\
A001635				☐ Primary		☐ General				1
City	State	Zip Code		☐ Runoff(Local Elections	Only)				
	List All Endo	rsers or Guara	ntors f	or Above Loa	n (If more spa	ace is needed	please attach a	page)		
First Name		Middle Name		-	First Name		<u></u>		Middle N	lame
Last Name/Organization Name					Last Name/Or	ganization Nam	ie		1	
Address					Address					
City		State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding	 ,		<u>. </u>	···········	Amount Guaranteed Outstanding					
First Name		Middle Name	; ;		First Name				Middle I	Name
Last Name/Organization Name				Last Name/Organization Name				1		
Address					Address					
City		State	Zip C	Code	City				State	Zió Code
Amount Guaranteed Outstanding		•	•		Amount Guar	anteed Outstan	ding			
First Name	.,	Middle Name	3		First Name				Middle	Name
Last Name/Organization Name					Last Name/O	rganization Nar	пе		٦	
Address					Address				(F.
City		State	Zip (Code	City		. .		State	ZID Code
Amount Guaranteed Outstanding					Amount Guar	anteed Outstan	ding		1	
First Name		Middle Name	8		First Name				Middle	Name
Last Name/Organization Name	•				Last Name/C	rganization Nar	me		·	A
Address	 		· · · · ·		Address					(
City		State	Zip (Code	City			-	State	Zip Code
Amount Guaranteed Outstanding					Amount Gua	ranteed Outstan	nding			
4. Totals for all Loans (comple (Total loans received should also be (Total loan payments should also be	shown in item 16. c shown in item 20. c	n summary page n summary page	i.)			Loan Balancs g of Period)	Loans Received	Loa Paym		Outstanding Loan Balance (End of Period)
(Total outstanding loan balance shou		tem 12.e. on front	page.)		1		age 5	of S		RDA 1159

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

				2. REPORT COVERING THE PERIOD			
COMPLETE THE APPROPRIATE ITEMS OBLIGATION (obligations totaling more that person/vendor at the end of the reporting person/vendor)	Outstanding Balance (Beginning of Period)	PROM: 7- 1-7 Debt Incurred This Period	Payments This Period	0utstanding Balance (End of Period)			
First Name	Middle Name						
Last Name/Business Name	Ш	,	-		_ ` \		
Address	·········						
City	State	Zip Code	_				
Description of Obligation	<u> </u>	.	—-I	L			
First Name	Middle Na	me				CK	
Last Name/Business Name			-		į	11)	
Address							
City	State	Zip Code					
Description of Obligation	1	<u> </u>		<u> </u>	<u> </u>	<u></u>	
First Name	Middle Na	ime					
Last Name/Business Name	<u></u>	·- <u>-</u>					
Address							
City	State	Zip Code			į		
Description of Obligation			<u>, </u>	<u></u>		· · · · · · · · · · · · · · · · · · ·	
First Name	Middle Na	me					
Last Name/Business Name			- .		,		
Address		···	_	i			
City	State	Zip Code	-				
Description of Obligation	<u> </u>		l	<u> </u>			
First Name	Middle Na	me					
Last Name/Business Name	<u> </u>		_				
Address							
City	State	Zip Code	1				
Description of Obligation					<u> </u>	A	
4. TOTALS (Total from Outstanding Balance - (End of Period) (olumn mue	t also he shown					
in Item 23b. on summary page.)	Munici inus	r also be silowii				V	

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