

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 6-28-20	2.a. NAME OF CANDIDATE OR COMMITTEE Jim Waters
2.b. IF COMMITTEE, NAME OF CANDIDATE Jim Waters	
3. ELECTION DATE 11-3-2020	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 244 South Byron Dr. Hendersonville, TN, 37075 615-945-8114	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone Same	
5. OFFICE SOUGHT (include district number, if applicable) ALDERMAN WARD 6	6. NAME OF POLITICAL TREASURER (may be candidate) Jim Waters
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input checked="" type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD April 1, 2020	8.b. ENDING DATE OF REPORTING PERIOD JUNE 30, 2020
9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.	
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <u>Jim Waters</u> signature of candidate </div> <div style="width: 15%;"> <u>6/28/20</u> date </div> <div style="width: 30%;"> <u>Jim Waters</u> signature of political treasurer </div> <div style="width: 15%;"> <u>6-28-20</u> date </div> </div>	
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <u>Virginia Waters</u> signature of witness </div> <div style="width: 10%;"> <u>6-28-20</u> date </div> <div style="width: 45%;"> <u>Virginia Waters</u> signature of witness </div> <div style="width: 10%;"> <u>6-28-20</u> date </div> </div>	
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	FILED AM PM \$ <u>893.93</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>650.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	JUN 29 2020 \$ <u>10.09</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	SUMNER COUNTY ELECTION COMMISSION \$ <u>1533.84</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Jim Waters</u>	14. REPORT COVERING THE PERIOD FROM: <u>4-1-20</u> TO: <u>6-30-20</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>0</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ _____
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>650.00</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>650.00</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)	
<u>POSTAGE</u>	\$ <u>10.09</u>
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>10.09</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>0</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>0</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.)	\$ <u>10.09</u>
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)	\$ <u>1200.00</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>1200.00</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ <u>0</u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>0</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Jim Water</i>		2. REPORT COVERING THE PERIOD FROM: <i>4-1-20</i> TO: <i>6-30-22</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount: <i>650.00</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name <i>JAMES</i>	Middle Name <i>G.</i>	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution <i>\$450.00</i>
Last Name/Organization Name <i>WATERS</i>		Date of Contribution <i>4-30-20</i>	Aggregate This Election <i>DONATION TO MY OWN CAMPAIGN</i>
Address <i>244 SOUTH BURN DR.</i>			
City <i>HENDERSONVILLE</i>	State <i>TN.</i>	Zip Code <i>37075</i>	
Occupation <i>RETIRED</i>	Employer <i>Q</i>		
First Name <i>LEE</i>	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution <i>200.00</i>
Last Name/Organization Name <i>PETERSON</i>		Date of Contribution	Aggregate This Election <i>DONATION TO CAMPAIGN WARD 2</i>
Address <i>248 LAKE TERRACE DR.</i>			
City <i>HENDERSONVILLE</i>	State <i>TN.</i>	Zip Code <i>37075</i>	
Occupation <i>UNKNOWN</i>	Employer		
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name		Date of Contribution	Aggregate This Election
Address			
City	State	Zip Code	
Occupation	Employer		
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name		Date of Contribution	Aggregate This Election
Address			
City	State	Zip Code	
Occupation	Employer		
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)</small>			<i>650.00</i>

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE JIM WATERS		2. REPORT COVERING THE PERIOD FROM 4-1-20 TO 6-30-20	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 1200.00
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 JAMIE HOUDESHELL		Middle Name	
Last Name/Organization Name BRIDGE STONE FIRE		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address STONE @ INDIAN LAKE		Value of In-Kind Contribution \$1,000.00	
City HENDERSONVILLE		Date of In-Kind Contribution 4-9-20	
State TN		Aggregate this Election	
Zip Code 37074		Description of In-Kind Contribution DONATION TO Campaign WARD 6	
Occupation	Employer		
First Name MARVIN		Middle Name	
Last Name/Organization Name BUCKHARDT		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address 106 WESSINGTON PL.		Value of In-Kind Contribution \$200.00	
City HENDERSONVILLE		Date of In-Kind Contribution 4-4-20	
State TN		Aggregate this Election	
Zip Code 37074		Description of In-Kind Contribution DONATION TO WARD 6 Campaign	
Occupation RETIRED	Employer		
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Value of In-Kind Contribution	
City		Date of In-Kind Contribution	
State		Aggregate this Election	
Zip Code		Description of In-Kind Contribution	
Occupation	Employer		
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Value of In-Kind Contribution	
City		Date of In-Kind Contribution	
State		Aggregate this Election	
Zip Code		Description of In-Kind Contribution	
Occupation	Employer		
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Value of In-Kind Contribution	
City		Date of In-Kind Contribution	
State		Aggregate this Election	
Zip Code		Description of In-Kind Contribution	
Occupation	Employer		
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)			1200.00

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE JIM WATERS			2. REPORT COVERING THE PERIOD		
			FROM: 11-20	TO: 12-30-20	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 0	
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					
Address					
City		State	Zip Code		
First Name		Middle Name		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		
First Name		Middle Name		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		
First Name		Middle Name		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		
5. TOTAL ITEMIZED EXPENDITURES				Amount 0	
(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 OR COMMITTEE Jim Waters				2. REPORT COVERING THE PERIOD FROM: 4-1-20 TO: 6-30-20				
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 Source of the Loan								
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
Last Name/Organization Name				Address		Loan Received For:		Date of Loan
City		State	Zip Code	<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<input type="checkbox"/> Runoff (Local Elections Only)		
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)								
First Name		Middle Name		First Name		Middle Name		
Last Name/Organization Name				Last Name/Organization Name				
Address				Address				
City		State	Zip Code	City		State	Zip Code	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding				
First Name		Middle Name		First Name		Middle Name		
Last Name/Organization Name				Last Name/Organization Name				
Address				Address				
City		State	Zip Code	City		State	Zip Code	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding				
First Name		Middle Name		First Name		Middle Name		
Last Name/Organization Name				Last Name/Organization Name				
Address				Address				
City		State	Zip Code	City		State	Zip Code	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding				
First Name		Middle Name		First Name		Middle Name		
Last Name/Organization Name				Last Name/Organization Name				
Address				Address				
City		State	Zip Code	City		State	Zip Code	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding				
4. Totals for all Loans (complete on last page of itemized loans)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
(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.)								



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<p style="font-size: 1.2em; margin: 0;"><u>JIM WATERS</u></p>				FROM: <u>4-1-20</u>		TO: <u>6-30-20</u>	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							