

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

RECEIVED
OCT - 5 2020
WILSON COUNTY
ELECTION COMMISSION

1. DATE OF REPORT <u>October 3, 2020</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Committee to Elect Rob</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Rob Lesternino</u>		3. ELECTION DATE <u>Nov. 3, 2020</u>	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route <u>225 University Ave</u>		City <u>Lebanon</u>	State <u>TN</u>
		Zip Code <u>37087</u>	Phone <u>615-927-5071</u>
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route		City	State
		Zip Code	Phone
5. OFFICE SOUGHT (include district number, if applicable) <u>MAUDP</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Betty W. Springer</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER	<input type="checkbox"/> SECOND QUARTER	<input checked="" 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 <u>7/1/20</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>9/30/20</u>	
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 checked="" 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.			
signature of candidate <u>[Signature]</u>		date <u>10-5-20</u>	signature of political treasurer <u>Betty W. Springer</u>
			date <u>10/3/20</u>
11. WITNESS SIGNATURE			
signature of witness <u>[Signature]</u>		date <u>10/5/20</u>	signature of witness <u>[Signature]</u>
			date <u>10/03/2020</u>
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$	<u>5015.61</u>
b. TOTAL RECEIPTS THIS PERIOD		\$	<u>7000.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD		\$	<u>2753.08</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$	<u>9262.53</u>
e. TQATAL LOANS OUTSTANDING		\$	<u>5500.00</u>
f. TOTAL OBLIGATIONS OUTSTANDING		\$	<u>0</u>



SUMMARY PAGE - CANDIDATE

RECEIVED
OCT - 5 2018
TROY, ALABAMA COUNTY COMMISSION

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Committee to Elect Rob Cesternino</u>	14. REPORT COVERING THE PERIOD FROM: <u>7/1/20</u> TO: <u>6/30/20</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 150.00

b. Itemized Contributions (over \$100 from each source this period) \$ 6350.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 6500.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 500.00

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 7000.00

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)

Contributions \$ 42.28

Charges for internet contributions \$ 6.60

..... \$ _____

Resund of bank fees \$ _____

First Horizon Bank \$ -15.00

P.O Box 84 \$ _____

Memphis, TN 38101 \$ _____

..... \$ _____

..... \$ _____

..... \$ _____

Total of Expenditures (\$100 or less each payee) \$ 83.88

b. Itemized Expenditures (Over \$100 each payee this period) \$ 2669.20

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 2753.08

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 2753.08

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) \$ _____

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 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 in item 12.f.) \$ 0



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OCT 15 2020
MILSON FROM
ELECTION DIVISION

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Rob Cesternino				2. REPORT COVERING THE PERIOD FROM: 7/1/20 TO: 9/30/20	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Lance		Middle Name A.		Contribution Received For:	
Last Name/Organization Name Sumrell				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 510 Dakota Dr.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Date of Contribution 7/13/20	
Zip Code 37087		Occupation Retired		Aggregate This Election \$100⁰⁰_{XX}	
Employer					
First Name Joyce		Middle Name B.		Contribution Received For:	
Last Name/Organization Name Hussey				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 23 Ridgcrest Road				<input type="checkbox"/> Runoff (Local Elections Only)	
City Hartsville		State TN		Date of Contribution 7/13/20	
Zip Code 37074		Occupation Security Solutions		Aggregate This Election \$500⁰⁰_{XX}	
Employer Self employed					
First Name Larimore		Middle Name L		Contribution Received For:	
Last Name/Organization Name Warren				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 200 Vineyard Way				<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Date of Contribution 7/18/20	
Zip Code 37087		Occupation Doctor		Aggregate This Election \$1600⁰⁰_{XX}	
Employer Vanderbilt Hospital					
First Name Larimore		Middle Name L		Contribution Received For:	
Last Name/Organization Name Warren				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 200 Vineyard Way				<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Date of Contribution 8/29/20	
Zip Code 37087		Occupation Doctor		Aggregate This Election \$1600⁰⁰_{XX}	
Employer Vanderbilt Hospital					
5. TOTAL ITEMIZED CONTRIBUTIONS (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.)					\$2200⁰⁰_{XX}

RECEIVED
OCT 5 2020
WILSON
ELECTIONS

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Bob Cesternino				2. REPORT COVERING THE PERIOD FROM: 7/1/20 TO: 9/30/20	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$2200
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name William		Middle Name J		Contribution Received For:	
Last Name/Organization Name Donson				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 12112 Carlton Lane				<input type="checkbox"/> Runoff (Local Elections Only)	
City Franklin		State TN		Zip Code 37064	
Occupation Consulting		Date of Contribution 8/13/20		Amount of Contribution \$50	
Employer Self-Employed				Aggregate This Election \$50	
First Name Patrick		Middle Name J		Contribution Received For:	
Last Name/Organization Name Dicks				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1105 S. Tarver Ave				<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Zip Code 37087	
Occupation		Date of Contribution 8/31/20		Amount of Contribution \$1000	
Employer Unemployed				Aggregate This Election \$1000	
First Name Neil		Middle Name E		Contribution Received For:	
Last Name/Organization Name Kirshner				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 315 Dandelion Dr.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Zip Code 37087	
Occupation		Date of Contribution 9/2/20		Amount of Contribution \$1500	
Employer Retired				Aggregate This Election \$1500	
First Name Helen		Middle Name M		Contribution Received For:	
Last Name/Organization Name Singer-Cash				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 6495 Coles Ferry Pike				<input type="checkbox"/> Runoff (Local Elections Only)	
City Lebanon		State TN		Zip Code 37087	
Occupation Realtor		Date of Contribution 8/20/20		Amount of Contribution \$1600	
Employer Wise & Johnson				Aggregate This Election \$1600	
5. TOTAL ITEMIZED CONTRIBUTIONS (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.)					\$6350

RECEIVED
OCT - 5 - 2010
WISCONSIN COMMISSION
ELECTION DIVISION

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <u>Committee to Elect Rob Costantino</u>	2. REPORT COVERING THE PERIOD FROM: <u>7/1/10</u> TO: <u>9/30/10</u>
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3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)	Amount <u>0</u>
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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	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Value of In-Kind Contribution
Last Name/Organization Name		Date of In-Kind Contribution		Aggregate this Election
Address		Description of In-Kind Contribution		
City	State	Zip Code		
Occupation	Employer			

First Name	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Value of In-Kind Contribution
Last Name/Organization Name		Date of In-Kind Contribution		Aggregate this Election
Address		Description of In-Kind Contribution		
City	State	Zip Code		
Occupation	Employer			

First Name	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Value of In-Kind Contribution
Last Name/Organization Name		Date of In-Kind Contribution		Aggregate this Election
Address		Description of In-Kind Contribution		
City	State	Zip Code		
Occupation	Employer			

First Name	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Value of In-Kind Contribution
Last Name/Organization Name		Date of In-Kind Contribution		Aggregate this Election
Address		Description of In-Kind Contribution		
City	State	Zip Code		
Occupation	Employer			

First Name	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Value of In-Kind Contribution
Last Name/Organization Name		Date of In-Kind Contribution		Aggregate this Election
Address		Description of In-Kind Contribution		
City	State	Zip Code		
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.)	<u>0</u>
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RECEIVED
OCT 20 2011
SONOMA COUNTY
ELECTIONS

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Bob Costantino		2. REPORT COVERING THE PERIOD FROM: 7/1/20 TO: 4/30/20	
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 Lebanon Wilson County Chamber of Commerce		Contribution	\$550.00
Address 149 Public Square			
City Lebanon	State TN		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Red Ivory Strategies		Retainer Ad Budget	\$350.00
Address P.O. Box 330913			
City Nashville	State TN		
First Name Helene	Middle Name M	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Singer-Cash		Bumper stickers & Coasters	\$880.20
Address 6795 Coles Ferry Pike			
City Lebanon	State TN		
First Name Helene	Middle Name M	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Singer-Cash		Yard Signs	\$889.00
Address 6795 Coles Ferry Pike			
City Lebanon	State TN		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
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.)			\$2669.20

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OCT - 5 2020
 WILSON COUNTY
 ELECTION COMMISSION

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Rob Cesternino	2. REPORT COVERING THE PERIOD FROM: 7/1/20 TO: 9/30/20
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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 Robert	Middle Name C	Outstanding Loan Balance (Beginning of Period) \$5000⁰⁰	Loans Received \$500⁰⁰	Loan Payments 0	Outstanding Loan Balance (End of Period) \$5500⁰⁰
Last Name/Organization Name CESTERMINO		Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Date of Loan 9/4/20	
Address 225 University Avenue		<input type="checkbox"/> Runoff (Local Elections Only)			
City Lebanon	State TN	Zip Code 37087			

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
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
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
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
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 Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
\$5000⁰⁰	500⁰⁰	0	\$5500⁰⁰



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OCT 7 2020
 PERSON COUNTY
 ELECTION DIVISION

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
Committee to Elect Rob Cesternino			FROM: 7/1/20	TO: 9/30/20		
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		0			0
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						D
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)						