

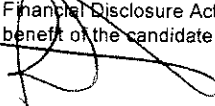
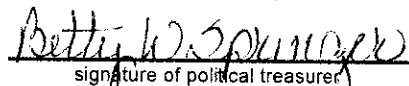
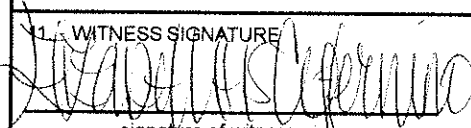
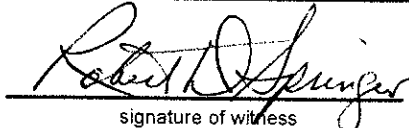
JUL 10 2020

WILSON COUNTY  
ELECTION COMMISSION

9:30

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <b>7/3/2020</b>		2.a. NAME OF CANDIDATE OR COMMITTEE <b>Committee to Elect Rob Cesternino</b>			
2.b. IF COMMITTEE, NAME OF CANDIDATE <b>Rob Cesternino</b>			3. ELECTION DATE <b>3 NOV 2020</b>		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route <b>225 University Avenue</b>		City <b>Lebanon</b>	State <b>TN</b>	Zip Code <b>37087</b>	Phone <b>615-927-5071</b>
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) <b>Mayor</b>			6. NAME OF POLITICAL TREASURER (may be candidate) <b>Betty W. Springer</b>		
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 <b>1 April 2020</b>			8.b. ENDING DATE OF REPORTING PERIOD <b>30 June 2020</b>		
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		<b>7-9-20</b> date		 signature of political treasurer	
				<b>7/9/2020</b> date	
11. WITNESS SIGNATURE					
 signature of witness		<b>7-9-20</b> date		 signature of witness	
				<b>7/9/2020</b> date	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT .....		\$ <u>1152.91</u>			
b. TOTAL RECEIPTS THIS PERIOD .....		\$ <u>7987.00</u>			
c. TOTAL DISBURSEMENTS THIS PERIOD .....		\$ <u>4124.30</u>			
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		\$ <u>5015.61</u>			
e. TOTAL LOANS OUTSTANDING .....		\$ <u>5000.00</u>			
f. TOTAL OBLIGATIONS OUTSTANDING .....		\$ <u>0</u>			



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JUL 10 2020

SUMMARY PAGE - CANDIDATE

WILSON COUNTY ELECTION COMMISSION

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Committee to Elect Rob Cesternino		14. REPORT COVERING THE PERIOD FROM: 4/1/2020 TO: 6/30/2020	
<b>RECEIPTS</b>			
15. CONTRIBUTIONS (other than loans and interest)			
a. Unitemized Contributions (\$100 or less from each source this period)		\$	387.00
b. Itemized Contributions (over \$100 from each source this period)		\$	2600.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$	2987.00
16. LOANS RECEIVED THIS REPORTING PERIOD		\$	5000.00
17. INTEREST RECEIVED THIS REPORTING PERIOD		\$	0
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$	7987.00
<b>DISBURSEMENTS</b>			
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>Wilson County Election Commission</u>		\$	38.00
<u>Huntsman for Governor</u>		\$	100.00
<u>First Horizon Bank service charge</u>		\$	15.00
<u>First Horizon Bank service charge</u>		\$	15.00
<u>First Horizon Bank service charge</u>		\$	15.00
<u>Charge for internet contributions</u>		\$	15.28
_____		\$	_____
_____		\$	_____
_____		\$	_____
Total of Expenditures (\$100 or less each payee)		\$	198.28
b. Itemized Expenditures (Over \$100 each payee this period)		\$	3926.02
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		\$	4124.30
20. LOAN REPAYMENTS MADE THIS PERIOD		\$	0
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		\$	4124.30
<b>22. IN-KIND CONTRIBUTIONS</b>			
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
<b>23. OBLIGATIONS</b>			
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 item 12.f.)		\$	0



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JUL 10 2020

WILSON COUNTY  
ELECTION COMMISSION

**ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Rob Cesternino				2. REPORT COVERING THE PERIOD FROM: 4/1/2020 TO: 6/30/2020	
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 Lanot		Middle Name P		Contribution Received For:	
Last Name/Organization Name MOORE		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Amount of Contribution \$500.00	
Address 500-A S Cumberland ST		<input type="checkbox"/> Runoff (Local Elections Only)			
City Lebanon	State TN	Zip Code 37087	Date of Contribution 21 May 2020		Aggregate This Election \$500.00
Occupation Business Owner					
Employer 231 Car Sales					
First Name Gavin		Middle Name NMN		Contribution Received For:	
Last Name/Organization Name YOST		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Amount of Contribution \$1600.00	
Address 15031 443RD AVE SE		<input type="checkbox"/> Runoff (Local Elections Only)			
City North Bend	State WA	Zip Code 98045	Date of Contribution 27 May 2020		Aggregate This Election \$1600.00
Occupation Business Owner					
Employer Alliance Building Services					
First Name James		Middle Name L		Contribution Received For:	
Last Name/Organization Name WHITE		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Amount of Contribution \$500.00	
Address 728 W. Main ST		<input type="checkbox"/> Runoff (Local Elections Only)			
City Lebanon	State TN	Zip Code 37087	Date of Contribution 26 June 2020		Aggregate This Election \$500.00
Occupation Business Owner					
Employer Agee & Johnson					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Amount of Contribution	
Address		<input type="checkbox"/> Runoff (Local Elections Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
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.)					\$2600.00

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WISCONSIN  
ELECTION COMMISSION

### ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Rob Cesternino				2. REPORT COVERING THE PERIOD FROM: 4/1/2020 TO: 6/30/2020		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0	
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:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	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.)					0	

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WILSON COUNTY  
ELECTION COMMISSION

**ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Bob Cesternino</i>		2. REPORT COVERING THE PERIOD FROM: <i>4/1/20</i> TO: <i>6/30/2020</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>0</i>
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 <i>Wilson County Black History Comm.</i>		<i>Donation</i>	<i>\$500.00</i>
Address <i>P.O. Box 391</i>			
City <i>Lebanon</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Red Ivory Strategies</i>		<i>Digital content and media print</i>	<i>\$787.00</i>
Address <i>P.O. Box 330413</i>			
City <i>Nashville</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Red Ivory Strategies</i>		<i>Advertising + telephone polling</i>	<i>\$900.00</i>
Address <i>P.O. Box 330913</i>			
City <i>Nashville</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Red Ivory Strategies</i>		<i>Campaign marketing materials + palm cards</i>	<i>\$400.00</i>
Address <i>P.O. Box 330913</i>			
City <i>Nashville</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Signs Now</i>		<i>Campaign office signs</i>	<i>\$460.47</i>
Address <i>218 1/2 Maple Street</i>			
City <i>Lebanon</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>J Clayborn's Bakery</i>		<i>Cookies + sandwiches for campaign kickoff</i>	<i>\$102.96</i>
Address <i>1021 W Main St</i>			
City <i>Lebanon</i>	State <i>TN</i>		
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.)			<i>\$3150.43</i>

JUL 10 2020

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

WILSON COUNTY ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Rob Lesterino</i>		2. REPORT COVERING THE PERIOD FROM: <i>4/1/20</i> TO: <i>6/30/2020</i>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>\$3150.03</i>	
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 <i>Visionary Design Group</i>		<i>Promotional Products</i>	<i>\$636.55</i>	
Address <i>300 Public Square</i>				
City <i>Watertown</i>	State <i>TN</i>			Zip Code <i>37184</i>
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name <i>First Horizon Bank</i>		<i>Charges for printing checks + correction on ck. amt. for ck # 1003 139.55 - .51</i>	<i>139.04</i>	
Address <i>P.O. Box 84</i>				
City <i>Memphis</i>	State <i>TN</i>			Zip Code <i>38101</i>
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name				
Address				
City	State			Zip Code
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name				
Address				
City	State			Zip Code
First Name	Middle Name			Purpose of Expenditure
Last Name/Business Name				
Address				
City	State			Zip Code
First Name	Middle Name			Purpose 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.)				<i>\$3926.02</i>

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JUL 10 2020

WIL  
ELECTIONS

### ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Committee to Elect Rob Cesternino</b>		2. REPORT COVERING THE PERIOD	
		FROM: <b>4/1/2020</b>	TO: <b>6/30/2020</b>

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 <b>Robert</b>	Middle Name <b>C</b>	Outstanding Loan Balance (Beginning of Period) <b>\$0</b>	Loans Received <b>\$5000.00</b>	Loan Payments <b>\$0</b>	Outstanding Loan Balance (End of Period) <b>\$5000.00</b>
Last Name/Organization Name <b>Cesternino</b>		Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Date of Loan <b>20 May 2020</b>	
Address <b>225 University Avenue</b>		<input type="checkbox"/> Runoff (Local Elections Only)			
City <b>Lebanon</b>	State <b>TN</b>	Zip Code <b>37087</b>			

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	City	State
Zip Code		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.)		<b>0</b>	<b>\$5000.00</b>	<b>0</b>	<b>\$5000.00</b>

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JUL 10 2020

WILSON COUNTY  
COMMISSIONER

### ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Rob Cesternino				2. REPORT COVERING THE PERIOD			
				FROM: 4/1/2020		TO: 6/30/2020	
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
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.)							0