CANDIDATE'S AFFIDAVIT IN LIEU OF REPORT

(to be filed by a candidate or his principal campaign committee)

Use ONLY if ALL of the following criteria are met: (1) candidate is running for a "major" or "district" office; (2) contributions/loans from one source, including those from the candidate, in excess of \$200 have not been received for this election; (3) expenditures in excess of \$5,000 have not been made for this election; and (4) an itemized (long) report has not been filed in connection with this election.

THIS AFFIDAVIT M	UST BE SWORN BEFORE A NOTARY	<u>′</u>
Full Name and Address of Candidate JUSTIN GATES P.O. Box 1313 Winnfield, LA 71483	Office Sought (Include title of office as well as parish, city, town and/or election district.) Winnfield City Judge Winn	OFFICE USE ONLY Report Number: 90919 Date Filed: 10/14/2020
3. Date of Primary 11/3/2020		=
This report covers from 7/22/2020	through 7/24/2020	
4. Type of Report:]
180th day prior to primary 10th day prior to general		
90th day prior to primary 4	10th day after general	
30th day prior to primary X A	Annual (future election)	
10th day prior to primary Supplemental (past election)		
5. FINAL REPORT if: Withdray	wn X Unopposed	
a. Name of Person Preparing Report JUSTIN GATES b. Daytime Telephone 318-648-9800		
7. I DO HEREBY CERTIFY, after being duly sworn, that, with respect to the election described above, I (the Committee) have (has) not received contributions form one source in excess of \$200 and have (has) not made expenditures totaling in excess of \$5,000 in the aggregate from the time of becoming a candidate (initial participation in this election) through the close of the current reporting period.		8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY a. Name and address of principal campaign committee, committee's chairperson and subsidiary committees, if any (use additional sheets if necessary). On attached sheet
Justin Gates	318-648-9800	
Signature of Candidate/Chairperson (To be signed by Chairperson <i>only</i> if report by	Daytime Telephone	
principal campaign committee)		
Sworn to and subscribed before me this14thday of	October , 2020 ,	
(City)	(State)	
NOTARY PUBLIC		
Form 101, Rev. 06/2008		1

90919

Report Number:

JUSTIN GATES

FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY

Name and address of principal campaign committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary).

Name and Address of Principal Campaign Committee

FRIENDS OF KEITH GATES PO Box 1433 Winnfield, LA 71483

Report Number: 90919 JUSTIN GATES