CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

				.		
DATE OF REPORT		NDIDATE OR CO				
7-9-2018	<u> </u>	e R. Sc	<u>kell</u>	a ELECTION S.		
2.b. IF COMMITTEE, NAME OF CANDID	ATE			3. ELECTION DA	=-	•
A CAMPAION APPRECO AND PROME		 	•	Aug. 2,	2018	-
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Ph	one
1558B Brinkley Bran	rch Rd. Hende	rsanuille	TN _	37075	415.	52.8399
4.b. CANDIDATE'S HOME ADDRESS (if s Street or Rural Route			State	Zip Code	Ph	one
5. OFFICE SOUGHT (include district nu	mber, if applicable)	6. NAME O	F POLITICAL	TREASURER (may	be candid	fate)
_	Astrict 4	_		2 Schell,		
7. CATEGORY OR REPORT (Check one						
FIRST SECOND T	HIRD FOURTH	□ PRE-	L_ PRE-	L_ MID-YEAR		YEAR-END
QUARTER QUARTER QU	ARTER QUARTER	PRIMARY	GENERAL DATE OF REPO	SUPPLEMENT ORTING PERIOD	AL SU	PPLEMENTAL.
8.a. BEGINNING DATE OF REPORTING PER	RIOD		e 30,3			
9. (Check one)		<u> au</u>	<u>c</u> au, <u>c</u>)D(G		
	detailed disclosure because	e contributions	including in-ki	ind) received total \$	1.000 or le	ess AND expendi-
a. This campaign is exempt from tures total \$1,000 or less for t	his reporting period. (Comp	plete items 12d.,	12e. and 12f.)		•
b. This campaign is required to	ile a detailed financial discl	osure because o	ontributions (i	ncluding in-kind) re	ceived tota	al more than \$1,000
and/or expenditures total mor	e than \$1,000 for this repor	ting period.				<u> </u>
I/we do solemnly swear or affirm the accurate accounting of campaign of Financial Disclosure Act. Additional benefit of the candidate or for any long the signature of candidate. Signature of candidate Signature Signature	entributions and expenditure	es required to be t no campaign co s defined by the	reported by to ontributions ha federal interna	ne candidate comm ive been expended	for the per	e Campaign 👔
11. WITNESS SIGNATURE Signature of witness	7//0/18 date		Cooper sign	Shell	<u></u>	7/10/18/ date
12. SUMMARY						
a. BALANCE ON HAND LAST REF	ORT	IFF	.	\$ 1785.	<u>90</u>	
b. TOTAL RECEIPTS THIS PERIOD		レー	P.M.	s <u>1900.</u>	01	
c. TOTAL DISBURSEMENTS THIS I	PERIOD	10201	3	s <u>2631.</u>	<u>8D</u>	
d. BALANCE ON HAND (12.a. plu	ں (.s 12.b. minus 12.c.	INER CON	INTY NOISSIN		s <u>1</u>	053.30
e. TOTAL LOANS OUTSTANDING	SUN	ION COM	/411		\$	0
C. TOTALEONING OUTON MONTO	ELL					<u>^</u>
f. TOTAL OBLIGATIONS OUTSTA	NDING				\$	<u> </u>

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (in Full)	14. REPORT COVERING THE PERIOD
Leseie R Schell	FROM: 4 22 18 TO: 6 30/18
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>200.50</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>1100.</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.).	\$ 1 100,52
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>-</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>.01</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 1900.51
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)
Republican Women's Club \$ 18.8	
KODOCKII.	<u>62</u>
social media \$ 25.	<u>00</u>
Staples - paper, encloped, poslagus 178.	.38
\$	
\$	
\$	<u></u>
\$	
\$	
	s 264.88
Total of Expenditures (\$100 or less each payee)	<u></u>
b. Itemized Expenditures (Over \$100 each payee this period)	3, 246118
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 3400
I SO LOAN DEPAYMENTS MADE THIS PERIOU	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 3 4 51. 60
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	2.b.)\$
23.OBLIGATIONS	~
a. Unitemized Obligations Outstanding (\$100 or less each)	\$\$
b. Itemized Obligations Outstanding (Over \$100 each)	<u> </u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown it	tem 12.f.)\$



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE LESCIE R Solu	LO DE		RING THE PERIOD TO: 6 30 2018
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTION		E (enter \$0 if first itemized page)	Amount
3. TOTAL TEMIZED CAMPAIGN CONTRIBUTE	CH LITEMIZED CONTRIBUTION (c	ontributions totaling more than \$100 from any contributor	ч)
	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Summer Association Address 35 Executive Pk	Practors	Primary Election General Election Runoff (Local Elections Only)	200.00
00 4 4	State Zip Code	Date of Contribution	Aggregate This Election
Occupation Employer	- N J 3/0/0	5/9/2018	200.00
First Name Broudon Last Name/Organization Name Address Sta Brinkley Bro	Middle Name Scholl Ar L. R.J.	Contribution Received For: Primary Election	Amount of Contribution
City Hendersonville Occupation Self-suplay Employer CDC.	3 10 75	Date of Contribution 4/30/2018	Aggregate This Election
First Name	Middle Name	Contribution Received For:	Amount of Contribution
First Name Last Name/Organization Name	Viiddle Name	Primary Election General Election	Amount of Contribution
	Viiddle Name	☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Last Name/Organization Name	Middle Name State Zip Code	Primary Election General Election	Amount of Contribution Aggregate This Election
Last Name/Organization Name Address		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Last Name/Organization Name Address City		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	Aggregate This Election
Last Name/Organization Name Address City Occupation		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Last Name/Organization Name Address City Occupation Employer	State Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution	Aggregate This Election
Last Name/Organization Name Address City Occupation Employer First Name	State Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election	Aggregate This Election
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address	State Zip Code Middle Name	Primary Election General 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
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State Zip Code Middle Name	Primary Election General 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

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

. NAME OF CANDIDATE OR COMM	ITTEE			2. REPORT COVE	ERING THE PERIOD				
I, NAME OF CANDIDATE OR COMM	H 1 EC			FROM:	TO:				
	· · · · · · · · · · · · · · · · · · ·				Amount				
. TOTAL ITEM ZED IN-KIND CONTR	RIBUTIONS FROM	PRECEDING PAGE	(enter \$0 if first itemized page	2)	- Library during the periodi				
. COMPLETE THE APPROPRIATE ITEM	S FOR EACH ITEMI	ZED IN-KIND CONTRI			Value of In-Kind Contribution				
st Name Middle Name			In-Kind Contribution Receive	In-Kind Contribution Received For: Primary Election General Election					
ast Name/Organization Name			Runoff (Local Electio	ons Only)					
Address	<u> </u>		Date of tn-Kind Contribution	Date of In-Kind Contribution					
City	State	Zip Code	Description of In-Kind Contribution	1					
Occupation	Employer	<u> </u>							
First Name	Middle Na	arnė	In-Kind Contribution Receive	ed For: General Election	Value of In-Kind Contribution				
Last Name/Organization Name			7 2	Runoff (Local Elections Only)					
Address			Date of In-Kind Contribution		Aggregate this Election				
City	State	250 Code	Description of In-Kind Contribution	N.					
Occupation	Employer				·				
First Name	Middle N	ame	In-Kind Contribution Received	ved For: General Election	Value of In-Kind Contribution				
Last Name/Organization Name	1		Runoff (Local Election	-					
Address			Date of In-Kind Contribution	Date of In-Kind Contribution					
City	State	Zip Code	Discription of In-Kind Contribution	on					
Occupation	Employer		7 \						
First Name	Middle N	lame	In-Kind Contribution Recei		Value of In-Kind Contribution				
Last Name/Organization Name			☐ Primary Election ☐ Runoff (Local Election	General Election	,				
Address		<u> </u>	Date of In-Kind Contribution		Aggregate this Election				
City	State	Zip Code	Description of In-Kind Contribut	den .					
Occupation	Employer								
First Name	Middle N	lame	In-Kind Contribution Reco	eived For:	Value of In-Kind Contribution				
Last Name/Organization Name	11	_ _	Primary Election Runoff (Local Election	_ \					
Address			Date of In-Kind Contribution		Aggregate this Election				
City	State	Zip Code	Description of In-Kind Contribut	ion	/				
Occupation	Employer	1	_						
5. TOTAL ITEMIZED IN-KIND COI	NTRIBUTIONS								
(Carry forward to item 3. of next page if ac (If this is the last page of in-kind contributi	ditional pages of this for	m are used.) e shown in item 22b. of su	mmary.)	_					
SS-1128 (Rev. 2/06)				Page of	RDA 1159				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVER						
lesere Roche		Amount					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU 4. COMPLETE THE APPROPRIATE ITEMS FOR E				od)			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name							
Sasaudtch			!	212 25			
Address	Lalirts		262.20				
City H'ville	State Zin Code 75	7					
First Name	Middle Name	Purpose of Expenditure	Purpose of Expenditure				
Last Name/Business Name		-					
Address 921 01 1 1 1 2	Dall	mailer		669.03			
-151 Old Gebarra	State Zip Code	Mario					
City Hernitage	TN 37074						
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure			
Last Namer Breiness Name	<u> </u>	1 ,					
411	Booth	Pobocall		442.72			
City Virginia Beach	State Zip Code	1 kom					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure			
		-					
Last Name Business Name)	100 90			
Address 2129 General 1	Swth	Robocal	(190.82			
City Virgina Beach	State Zip Code 22454	Kopoc					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Roboco)		. ^	1,22			
Address 2129 General F	South _	Pobucas	U	133.12			
Chy Virginia Beach	State Zip Code 54						
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Fox Printing							
Address 931 Old lebono	O I	mailer)	669.03			
City Hermitage	State Zip Code 37076						
5. TOTAL ITEMIZED EXPENDITURES				221.00			
(Carry forward to item 3. of next page if additional page (If this is the last page of expenditures, this amount m	pes of this form are used.) ust be shown in item 19b. of summary.)		<u> </u>	2,366,92			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE O	OR COMMITTEE			•			2. F		COVERING	THE PERIOD
3. COMPLETE TREAPPRO	PRIATE ITEMS F	OR EACH IT	EMIZED L	OAN (loa	ans totaling m	ore than \$100 fro	m any source	during the pe	riod)	<u> </u>
Complete the Following for the						Lama		an	Outetano	ling Loan Balance
First Name	Middle Name	•		tanding Loa eginning of		Loans Received		nents		d of Period)
Last Name/Organization Name	\	<u></u>								
Address	\			n Received				Date of Loa	an	
City	State	Zip Code		Primary E Runoff (Lo	lection ocal Elections	General Ele Only)	ection			
	List All Emilon	ers or Guarar	ntors for Ab	ove Loan	(If more spa	ce is needed p	lease attach	a page)		
First Name		Middle Name			First Name				Middle Na	тие
Last Name/Organization Name	<u> </u>			·	_ast Name/Or	ganization Name			•	
Address			<u> </u>	ľ	Address					
City		State	Zh Code		City	-			State	Zip Code
Amount Guaranteed Outstanding	·—·				Amount Guara	nteed Outstandir	ng			
First Name		Middle Name			First Name		,		Middle Na	me
Last Name/Organization Name	············				Last Name/O	ganization Name	•			
Address	 				Address		-			
City		State	Zip Code		City			<u>.</u>	State	Zip Code
Amount Guaranteed Outstanding	·		<u>., </u>		Amount Guar	anteed Outstandi	ng			
First Name		Middle Name			First Name	\			Middle N	arne
Last Name/Organization Name		<u> </u>			Last Name/O	rganization Name	•			
Address					Address					
City		State	Zip Code		City	<u></u>	$\overline{}$	<u></u>	State	Zip Code
Amount Guaranteed Outstanding		· · · · · ·	<u> </u>		Amount Guar	anteed Outstandi	ing		.4	
First Name		Middle Name	2		First Name				Middle N	ame
Last Name/Organization Name	<u>,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </u>	<u> </u>			Last Name/C	rganization Namo	e	1		
Address		_			Address	· · · · · · · · · · · · · · · · · · ·		$\overline{}$		
City		State	Zip Code		City				State	Zip Code
Amount Guaranteed Outstanding					Amount Gua	anteed Outstand	ing		1	
4. Totals for all Loans (composite of the composite of th	be shown in item 16. on be shown in item 20. on	summary page. summary page.	.) :.)			Loan Balance of Period)	Loans Received	1	oan yments	Outstanding Loan Balance (End of Period)
SS-1132 (Rev. 4/		I ELOT OTHORI			<u> </u>	Pá	age	of J		RDA 1159

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
			FROM: TO:			
 COMPLETE THE APPROPRIATE ITEMS: OBLIGATION (obligations totaling more that person/vendor at the end of the reporting r 	ın \$100 ow	ITEMIZED ed to any	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Na	me				
.ast Name/Business Name					•	-
Address					<u> </u>	
City	State	Zip Code				
Description of Obligation	1					
First Name	Middle Na	ame			i	
Last Name/Business Name	1					
Address	/	\				
City	State	Zip Code				
Description of Obligation		1				
First Name	Middle N	larne				
Last Name/Business Name			abla			
Address			7			
City	State	Zip Code	7			
Description of Obligation						
First Name	Middle I	Vame				
Last Name/Business Name			_ \			
Address	_					
City	State	Zip Code				
Description of Obligation						
First Name	Middle	Name		1		
Last Name/Business Name	L				\setminus	
Address						
City	State	Zip Code				
Description of Obligation					1	
4. TOTALS						
(Total from Outstanding Balance - (End of Period in item 23b. on summary page.)	od) column r	must also be show	n			
SS-1127 (Rev. 4/02)		<u> </u>		Page	[of	RDA 1159