CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

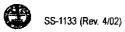
For State and Local Candidates

	Onlyle-Oat	IUIUALE	Committe	# # 5					
1. DATE OF REPORT	2.a. NAMEOFC								
07/01/2022	Pascal	Jouve	nce						
2.b. IF COMMITTEE, NAME OF CANDIDATE	<u></u>			3. ELECTION DATE					
				11/08/202	2.2				
4.a. CAMPAIGN ADDRESS AND PHONE		·		11/00/202					
Street or Rural Route	City		State	Zip Code	Phone				
1335 Long Hollow Pike	Gallatin		TN	37066					
4.b. CANDIDATE'S HOME ADDRESS (if different	t than 4.a.)				····				
Street or Rural Route	City		State	Zip Code	Phone				
1335 Long Hollow Pike	Gallatin		TN	37066					
5. OFFICE SOUGHT (include district number, if	fapplicable)	6. NAME	OF POLITICAL	TREASURER (may be	candidate)				
Gallatin Alderman Dist	crict 3	F	ascal Jo	uvence					
7. CATEGORY OR REPORT (Check one)									
					П				
FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH	PRE-	PRE-	MID-YEAR	YEAR-END				
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY 8 b ENDIN	GENERAL IG DATE OF REPO	SUPPLEMENTAL DETING PERIOD	SUPPLEMENTAL				
04/01/2022			30/2022	ATTION ENGLY					
9. (Check one)									
a. This campaign is exempt from detaile	d disclosure becaus	e contribution	ns (including in-ki	nd) received total \$1,00	0 or less AND expendi-				
tures total \$1,000 or less for this repo	rting period. (Comp	olete items 12	d., 12e. and 12f.)	•					
b. 🔀 This campaign is required to file a det	tailed financial disclo	sure becaus	e contributions (in	ncluding in-kind) receive	d total more than \$1,000				
and/or expenditures total more than \$	1,000 for this report	ing period.	•	,					
					· · · · · · · · · · · · · · · · · · ·				
10. I/we do solemnly swear or affirm that the in									
accurate accounting of campaign contribution Financial Disclosure Act Additionally Time	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 of for any other nonpolitical purpose as defined by the federal internal reverse code.									
The same of the sa									
	07/01/22		_	\cap	07/01/22				
signature of carrendate	date	_	signature o	r citical treasurer	date				
				X					
11. WITNESS SIGNATURE			787.	/					
h / /			in a second	, , , , , , , , , , , , , , , , , , ,					
Michell Suran	07/01/22	1	1/1/2/	1221020	107/01/22				
signature of witness	date	<u>-</u>	signa	ture of witness	date				
					- udio				
12. SUMMARY									
				14.00					
a. BALANCE ON HAND LAST REPORT	FILE)		.\$14.93					
L TOTAL DECEMBER 110 DEDICE	AM	PM		11 575 00					
b. TOTAL RECEIPTS THIS PERIOD		2022	······	\$ 11,575.00					
c. TOTAL DISBURSEMENTS THIS PERIOD	JUL 06	2022		33.49					
The state of the s	SUMNER C	OUNTY		. 3 ———					
d. BALANCE ON HAND (12.a. plus 12.b. m	SUMNER CO Dinus 1264 CA CA	MMISSION		\$	11,156.44				
	ELECTION	·							
e. TOTAL LOANS OUTSTANDING					10,500.00				
T. TOTAL CONTROL OF TOTAL DIRECTION				\$	10,000.00				
FOTAL OPERCATIONS OF TOTAL STATE					-				
f. TOTAL OBLIGATIONS OUTSTANDING				\$					



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT COVERING THE PERIOD					
Pascal Jouvence		FROM:04/01/22 TO:06/30/22					
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)							
a. Unitemized Contributions (\$100 or less from each source this pe	eriod)	\$50.00_					
b. Itemized Contributions (over \$100 from each source this period)		s 1,125.00					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 1	\$ 1,175.00						
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>10,000.00</u>						
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$						
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in iter	n 12.b.)	\$ <u>11,175.00</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)					
PAYPAL FEES	\$ 33.49	<u> </u>					
	\$						
	\$	<u></u>					
	\$						
	\$						
	\$						
	\$						
	\$						
	\$						
Total of Famouditures (C400 as Language)		. 22 40					
Total of Expenditures (\$100 or less each payee)							
b. Itemized Expenditures (Over \$100 each payee this period)							
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. a							
20. LOAN REPAYMENTS MADE THIS PERIOD							
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in i	tem 12.c.)	\$ _ 33.49					
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.)\$							
23. OBLIGATIONS							
a. Unitemized Obligations Outstanding (\$100 or less each)\$							
. Itemized Obligations Outstanding (Over \$100 each)\$							
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$							



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

_			2. REPORT COVERING THE PERIOD			
					TO: 06/30/22	
3 TOTAL ITEMIZED CAMPAIGN CONTRIBUT	Amount					
TOTAL ITEMIZED CAMPAIGN CONTRIBUT COMPLETE THE APPROPRIATE ITEMS FOR				<u> </u>	<u> </u>	
4. COMPLETE THE APPROPRIATE ITEMS FOR E	_			100 from any contributor		
First Name TOM	Middle Nar	me	Contribution Received For:	Amount of Contribution		
Last Name/Organization Name BERCAW			Primary Election	1,000.00		
Address 3530 W GARRY AVEN	UE .		Runoff (Local Election			
City SANTA ANA	State CA Zip Code 92704		Date of Contribution	Aggregate This Election		
Occupation BUSINESS OWNER			5/13/2022	1,000.00		
Employer INSULTECH				•		
First Name MATTHEW	Middle Nar	me	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name SCHOAF			Primary Election	General Election	125.00	
Address 100 GOVERNORS POI	NT B	OULEVARD	Runoff (Local Election	s Only)	123.00	
City HENDERSONVILLE	State TN	Zip Code 3 7 0 7 5	Date of Contribution		Aggregate This Election	
Occupation EXECUTIVE		06/14/202	125.00			
Employer FREE MARKET HEAL	TH			į		
	Middle Name					
First Name	Middle Nam	ne	Contribution Received For:		Amount of Contribution	
First Name Last Name/Organization Name	Middle Nam	ne	_	General Election	Amount of Contribution	
	Middle Nam	ne .	_	_	Amount of Contribution	
Last Name/Organization Name	Middle Nam	Zip Code	Primary Election	_	Amount of Contribution Aggregate This Election	
Last Name/Organization Name Address			☐ Primary Election ☐ Runoff (Local Election	_		
Last Name/Organization Name Address City			☐ Primary Election ☐ Runoff (Local Election	_		
Last Name/Organization Name Address City Occupation		Zip Code	☐ Primary Election ☐ Runoff (Local Election	_		
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	_	Aggregate This Election	
Last Name/Organization Name Address City Occupation Eniployer First Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	s Only) General Election	Aggregate This Election	
Last Name/Organization Name Address City Occupation Enoployer First Name Last Name/Organization Name	State	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For:	s Only) General Election	Aggregate This Election	
Last Name/Organization Name Address City Occupation Enoployer First Name Last Name/Organization Name Address	State Middle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	s Only) General Election	Aggregate This Election Amount of Contribution	
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Nam	Zip Code	Primary Election Runoff (Local Election Date of Contribution Contribution Received For: Primary Election Runoff (Local Election	s Only) General Election	Aggregate This Election Amount of Contribution	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT CO					ING THE PERIOD	
Pascal Jouvence FROM:04/01/2					TO: 06/30/22	
TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$0	
				L		
4. COMPLETE THE APPROPRIATE ITEMS FOR E				to any payee during the peri	od)	
First Name	Middle Nar	ame Purpose of Expenditure			Amount of Expenditure	
Last Name/Business Name						
Address			1			
City	State	Zip Code	-			
First Name	Middle Nar	ne	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name			†			
Address			-			
City	State	Zip Code				
First Name	t Name Middle Name				Amount of Expenditure	
Last Name/Business Name						
Address			1			
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	ame Middle Name				Amount of Expenditure	
Last Name/Business Name						
Address			1			
City	State	Zip Code]			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount mus						

ITEMIZED STATEMENT OF LOANS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVERING THE PERIOD								RING THE PERIOD		
Pascal Jouvence								FROM: TO: 06/30/22		
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 Pascal				Outstanding L (Beginning o		Loans Receiv		Loan syments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name 500 Jouvence					.00	10,00	0.00 0	.00	0,500.00	
Address Loan Receive 1335 LONG HOLLOW PIKE				3500.2531						
City GALLATIN	State TN	Zip Code			ry Election General Election 06/28/2022 (Local Elections Only)				2022	
L	ist All Endor	sers or Guara	ntors fo	r Above Loa	n (If more spa	ice is neede	ed please attac	h a page)		
First Name		Middle Name			First Name				Middle	Name
Last Name/Organization Name					Last Name/Organization Name					
Address	· · · -				Address					
City		State	ZIp Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding		1			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			ode	City State Zip Code					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 Co	de	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 Co	de	City		St		State	Zip Code
Amount Guaranteed Outstanding		L	<u>. </u>		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.)				Outstanding Lo (Beginning		Loans Received	Loa Paym		Outstanding Loan Balance (End of Period)	
(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.)					.00	10,00		.00	10,500.00	

