



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 4/27/26 2.a. Candidate or Committee Name: Jill Rothert
 2.b. If Committee, Name of Candidate: _____ 3. Election Date: May 5, 2026
 4. Campaign Address: 101 William Shy Dr.
 City: Hendersonville State: TN Zip Code: 37075 Phone: 615-476-8462
 5. Candidate Home Address: 101 William Shy Dr.
 City: Hendersonville State: TN Zip Code: 37075 Phone: 615-476-8462
 Candidate Email Address: Rothert @ schoolboard@gmail.com
 6. Office Sought: (include district number, if applicable) Sumner County School Board District 1
 7. Name of Political Treasurer (may be candidate): Tim Rothert
 Political Treasurer Email Address: Trothert@hotmail.com

8. Category or Report: (check one)
 First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 Mid-Year Supplemental Year-End Supplemental Runoff Election

9. Reporting Period: Start Date: 4/1/26 End Date: 4/25/26

10. Detailed Disclosure: (Check one)
 This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
 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.

11. 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.

<u>Jill Rothert</u>	<u>4/27/26</u>	<u>[Signature]</u>	<u>4/27/26</u>
Candidate Signature	Date	Political Treasurer Signature	Date
<u>[Signature]</u>	<u>4/27/26</u>	<u>[Signature]</u>	<u>4/27/26</u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report	FILED	APR 27 2026	PM	\$ <u>1657.26</u>
b. Total Receipts This Period				\$ <u>2493.40</u>
c. Total Disbursements This Period				\$ <u>554.92</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)				\$ <u>3595.74</u>
e. Total Loans Outstanding				\$ <u>-0-</u>
f. Total Obligations Outstanding				\$ <u>-0-</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jill Rathert

14. Reporting Period: Start Date: 4/1/26 End Date: 4/25/26

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 0
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ 2493.40
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 2493.40

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 554.92
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period..... \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 554.92

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 2455.00
- c. Total In-Kind Contributions Received This Period \$ 2455.00

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jill Rathert
2. Reporting Period: Start Date: 4/1/26 End Date: 4/25/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ -0-

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Vonessa Middle Name: _____ Last Name: Sickwood
Address: 234 Lake Terrace Dr City: Hendersonville State: TN Zip Code: 37075
Occupation: Finance Employer: UBS
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/6/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Tim & Jill Middle Name: _____ Last Name: Rathert
Address: 101 William Sky Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: President Employer: Red Lion Food Group
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 2000.00 Date of Contribution: 4/6/26 Aggregate This Election: \$ _____

Business or Organization Name: Lynn's Patio Furniture OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 441 West Main St City: Hendersonville State: TN Zip Code: 37075
Occupation: Outdoor Furnishing Employer: Lynn's
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 150.00 Date of Contribution: 4/20/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Ruth Middle Name: _____ Last Name: Fennell
Address: 1049 BlueJay Way City: Gallatin State: TN Zip Code: 37066
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50.00 Date of Contribution: 4/10/26 Aggregate This Election: \$ _____

Total Contributions: \$ 2,300.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jim Rothart
2. Reporting Period: Start Date: 4/1/26 End Date: 4/25/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2300.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Alan Middle Name: _____ Last Name: Bolick
Address: 163 Allon Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 95.70 Date of Contribution: 4/20/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Doug & Donna Middle Name: _____ Last Name: Feldmaier
Address: 207 Bohia Mar Pt. City: Hendersonville State: TN Zip Code: 37075
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Susanne Middle Name: M Last Name: Thoen
Address: 1424 Corderock Springs Dr. City: Gallatin State: TN Zip Code: 37066
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50.00 Date of Contribution: 4/18/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ 2493.40

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jill Rothert
2. Reporting Period: Start Date: 4/1/26 End Date: 4/25/26
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ -0-

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: _____ OR

First Name: Tim & Jill Middle Name: _____ Last Name: Rothert

Address: 101 William Shy Dr City: Hendersonville State: TN Zip Code: 37075

Occupation: President Employer: Red Lion Food Group

In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ 2455.00 In-Kind Contribution Date: 4/16/26 Aggregate This Election: \$ _____

Description of In-Kind Contribution: Direct Edge Campaign Mailer

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 2455.00

(Carry forward to the 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 the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jill Rothert
2. Reporting Period: Start Date: 4/1/26 End Date: 4/25/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ -0-

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: ASAP Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 116 Imperial Dr. City: Hendersonville State: TN Zip Code: 37075
Purpose of Expenditure: Push Cards - Handouts
Amount of Expenditure: \$ 177.25 Date of Expenditure: \$ 4/9/25

Business or Organization Name: Guild Elementary Fundraiser OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1018 South Water St. City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: Fundraiser Donation
Amount of Expenditure: \$ 100.00 Date of Expenditure: \$ 4/9/26

Business or Organization Name: ASAP Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 116 Imperial Dr. City: Hendersonville State: TN Zip Code: 37075
Purpose of Expenditure: Push Cards
Amount of Expenditure: \$ 277.67 Date of Expenditure: \$ 4/13/26

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ 554.92

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)