

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 4-7-22	2.a. NAME OF CANDIDATE OR COMMITTEE MARY ELLEN GENUING
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE MAY 3RD 2022
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 1100 LOCK-4 RD GALLATIN TN 37066 615477852	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone 1100 LOCK-4 RD GALLATIN TN 37066 615477852	
5. OFFICE SOUGHT (include district number, if applicable) County Commissioner	6. NAME OF POLITICAL TREASURER (may be candidate) MARY GENUING
7. CATEGORY OR REPORT (Check one) <input checked="" type="checkbox"/> FIRST QUARTER <input 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 JANUARY 16, 2022	8.b. ENDING DATE OF REPORTING PERIOD MARCH 31, 2022
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. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> <p><i>Nancy C. Senurg</i> 4-7-22 signature of candidate date</p> </div> <div style="text-align: center;"> <p><i>Nancy C. Senurg</i> 4-7-22 signature of political treasurer date</p> </div> </div>	
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> <p><i>John G. Genuing</i> 4-7-22 signature of witness date</p> </div> <div style="text-align: center;"> <p><i>Michelle Kirby</i> 4/7/22 signature of witness date</p> </div> </div>	
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>- 0 -</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>1,500</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>1,930.63</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>430.63</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>1000.00</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>- 0 -</u>

APR 08 2022



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>MARY ELLEN GEDUNG</u>	14. REPORT COVERING THE PERIOD FROM: <u>1-16-22</u> TO: <u>3-31-22</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>500⁰⁰</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>-0-</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>500⁰⁰</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>1430⁶³</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>-0-</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>1930⁶³</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)	
<u>FACEBOOK ADS</u>	\$ <u>75⁰⁰</u>
<u>S&S Printing</u>	\$ <u>259.43</u>
<u>A.G.E. Printing</u>	\$ <u>912.00</u>
<u>Vista Printing</u>	\$ <u>279.51</u>
<u>Vista Printing</u>	\$ <u>241.32</u>
<u>STATORARY EXPRESS</u>	\$ <u>193.80</u>
.....	\$ _____
.....	\$ _____
.....	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>75⁰⁰</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>1855.63</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>1,930.63</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>-0-</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>1,930.63</u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u>-0-</u>
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ <u>-0-</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>-0-</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ <u>-0-</u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>-0-</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.)	\$ <u>-0-</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>MARY ELLEN GENUNG</i>			2. REPORT COVERING THE PERIOD FROM: <i>1-16-22</i> TO: <i>3/31/22</i>		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>500.00</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>INDIVIDUALS</i>		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	100.00
Address				<input type="checkbox"/> Runoff (Local Elections Only)	X 5 = 500.00
City		State	Zip Code	Date of Contribution	Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	Aggregate This Election
Occupation					
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(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.)</small>				<i>-0-</i>	

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>MARY ELLEN GENUNG</i>			2. REPORT COVERING THE PERIOD FROM: <i>1-16-22</i> TO: <i>3-31-22</i>		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>- 0 -</i>	
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	
Address		Date of In-Kind Contribution		Aggregate this Election	
City		State	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	
Address		Date of In-Kind Contribution		Aggregate this Election	
City		State	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	
Address		Date of In-Kind Contribution		Aggregate this Election	
City		State	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	
Address		Date of In-Kind Contribution		Aggregate this Election	
City		State	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	
Address		Date of In-Kind Contribution		Aggregate this Election	
City		State	Description of In-Kind Contribution		
Occupation		Employer			
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS				Amount	
(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.)				<i>- 0 -</i>	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>MARY ELLEN GEXUNG</i>		2. REPORT COVERING THE PERIOD FROM: <i>1-16-22</i> TO: <i>3-31-22</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount: <i>1930.63</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name <i>SOS Printing</i>		Middle Name	Purpose of Expenditure
Last Name/Business Name <i>SOS PRINTING</i>			Printing of CARDS
Address <i>706 Space Park N.</i>			
City <i>Coodlettsville,</i>	State <i>TN</i>	Zip Code <i>37092</i>	
Amount of Expenditure <i>\$229.43</i>			
First Name		Middle Name	Purpose of Expenditure
Last Name/Business Name <i>AGE GRAPHICS</i>			Sign Printing
Address <i>52231 State Route 248</i>			
City <i>Long Bottom</i>	State <i>OH</i>	Zip Code <i>45743</i>	
Amount of Expenditure <i>\$912.00</i>			
First Name		Middle Name	Purpose of Expenditure
Last Name/Business Name <i>Vista Print</i>			Printing shirts
Address <i>275 WYMANN Street</i>			
City <i>WALTHAM</i>	State <i>MA</i>	Zip Code <i>02451</i>	
Amount of Expenditure <i>\$279.51</i>			
First Name		Middle Name	Purpose of Expenditure
Last Name/Business Name <i>Vista Printing</i>			Pens caps, PRINTING
Address <i>275 WYMANN Street</i>			
City <i>WALTHAM</i>	State <i>MA</i>	Zip Code <i>02451</i>	
Amount of Expenditure <i>\$241.32</i>			
First Name <i>S</i>		Middle Name	Purpose of Expenditure
Last Name/Business Name <i>STATIONARY EXPRESS</i>			CARD PRINTING
Address <i>8581 SANTA MALICA BLVD</i>			
City <i>Los Angeles</i>	State <i>Ca</i>	Zip Code <i>90069</i>	
Amount of Expenditure <i>\$193.80</i>			
First Name		Middle Name	Purpose of Expenditure
Last Name/Business Name <i>FACEBOOK ADS</i>			ADS FOR CAMPAIGNE
Address <i>1 HACKER WAY</i>			
City <i>menlo PARK</i>	State <i>Ca</i>	Zip Code <i>94025</i>	
Amount of Expenditure <i>\$75.00</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>1930.63</i>

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE MARY ELLEN GENUNG		2. REPORT COVERING THE PERIOD FROM: 1-16-22 TO: 3-31-22	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period) 1000.00			
Complete the Following for the Source of the Loan			
First Name MARY	Middle Name ELLEN	Outstanding Loan Balance (Beginning of Period) -0-	Outstanding Loan Balance (End of Period) 1430⁰⁰
Last Name/Organization Name GENUNG		Loans Received 1430⁰⁰	Loan Payments -0-
Address 1100 LOCK 4 RD		Loan Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City GALLATIN State TN Zip Code 37066		Date of Loan 2/2/2022	
<input type="checkbox"/> Runoff (Local Elections Only)			
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)			
First Name MARY	Middle Name ELLEN	First Name	Middle Name
Last Name/Organization Name GENUNG		Last Name/Organization Name	
Address 1100 LOCK 4 ROAD		Address	
City GALLATIN	State TN	City	State
Zip Code 37066		Zip Code	
Amount Guaranteed Outstanding 1000⁰⁰		Amount Guaranteed Outstanding	
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	
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	
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) (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 a. on front page.)			
Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
-0-	1000⁰⁰	-0-	1000⁰⁰



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
MARY ELLEN GENUNG				FROM: 1-16-22 TO: 3-31-22			
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-	\$1000 ⁰⁰	-0-	\$1000 ⁰⁰	
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
MARY ELLEN GENUNG 1100 LOCK 4 ROAD GALLATIN TN 37066 LOAN TO SELF CAMPAIGNE							
First Name	MIDDLE NAME		-0-	\$430 ⁶³	-0-	\$430 ⁶³	
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
MARY ELLEN GENUNG 1100 LOCK 4 RD GALLATIN TN 37066 PAYMENTS FOR PURCHASES FOR ITEMS							
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-	1430 ⁶³	-0-	1430 ⁶³	