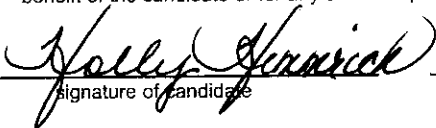

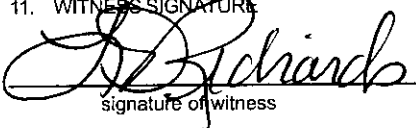
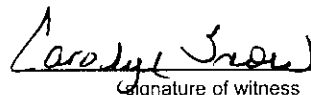


# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <b>4/1/22</b>	2.a. NAME OF CANDIDATE OR COMMITTEE <b>Holly Hemmrich</b>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <b>5/3/22</b>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route      City      State      Zip Code      Phone <b>158 Rebecca Dr.      Hendersonville TN      37075      615-551-4292</b>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route      City      State      Zip Code      Phone	
5. OFFICE SOUGHT (include district number, if applicable) <b>Register of Deeds</b>	6. NAME OF POLITICAL TREASURER (may be candidate) <b>Cindy L. Biley</b>
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 <b>1/16/22</b>	8.b. ENDING DATE OF REPORTING PERIOD <b>3/31/22</b>
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;"> <div style="text-align: center;">             signature of candidate         </div> <div style="text-align: center;"> <b>4/6/22</b>            date         </div> <div style="text-align: center;">             signature of political treasurer         </div> <div style="text-align: center;"> <b>4-6-22</b>            date         </div> </div>	
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">             signature of witness         </div> <div style="text-align: center;"> <b>4/6/22</b>            date         </div> <div style="text-align: center;">             signature of witness         </div> <div style="text-align: center;"> <b>4-6-22</b>            date         </div> </div>	
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	<b>FILED</b> AM      PM      \$ <b>20149.67</b>
b. TOTAL RECEIPTS THIS PERIOD	<b>APR 06 2022</b> \$ <b>1365.13</b>
c. TOTAL DISBURSEMENTS THIS PERIOD	<b>SUMNER COUNTY</b> <b>ELECTION COMMISSION</b> \$ <b>1140.00</b>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <b>20374.74</b>
e. TOTAL LOANS OUTSTANDING	\$ <b>20,000.00</b>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ _____





## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Holly Hemmrich</b>				2. REPORT COVERING THE PERIOD	
				FROM: <b>1/16/22</b>	TO: <b>3/31/22</b>
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>- 0 -</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>Cindy</b>		Middle Name		Contribution Received For:	
Last Name/Organization Name <b>Briley</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <b>650 N. Broadway</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>Portland</b>		State <b>TN</b>	Zip Code <b>37148</b>	Date of Contribution <b>1/16/22</b>	Amount of Contribution <b>\$230.<sup>13</sup></b>
Occupation <b>Register of Deeds</b>				Aggregate This Election	<b>\$230.<sup>13</sup></b>
Employer					
First Name <b>Frank &amp; Kayla</b>		Middle Name		Contribution Received For:	
Last Name/Organization Name <b>Mauberry</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <b>100 Werner Dr.</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>Hendersonville</b>		State <b>TN</b>	Zip Code <b>37015</b>	Date of Contribution <b>1/20/22</b>	Amount of Contribution <b>\$200.<sup>00</sup></b>
Occupation <b>AT&amp;T/Sumner County School Teacher</b>				Aggregate This Election	<b>\$200.<sup>00</sup></b>
Employer					
First Name <b>Becky</b>		Middle Name		Contribution Received For:	
Last Name/Organization Name <b>Zastrow</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <b>105 Hillside Dr.</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>Hendersonville</b>		State <b>TN</b>	Zip Code <b>37015</b>	Date of Contribution <b>1/20/22</b>	Amount of Contribution <b>\$200.<sup>00</sup></b>
Occupation <b>Central Contract Specialist</b>				Aggregate This Election	<b>\$200.<sup>00</sup></b>
Employer <b>CGI Federal</b>					
First Name <b>Ron &amp; Susan</b>		Middle Name		Contribution Received For:	
Last Name/Organization Name <b>Blanton</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <b>103 William Shy Dr.</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>Hendersonville</b>		State <b>TN</b>	Zip Code <b>37015</b>	Date of Contribution <b>1/20/22</b>	Amount of Contribution <b>\$100.<sup>00</sup></b>
Occupation <b>Assistant District Attorney</b>				Aggregate This Election	<b>\$100.<sup>00</sup></b>
Employer <b>Sumner County District Attorney</b>					
5. TOTAL ITEMIZED CONTRIBUTIONS (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.)					<b>730.<sup>13</sup></b>

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>\$730.<sup>13</sup></b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name <b>Cindy</b>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>Williams</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$150.<sup>00</sup></b>
Address <b>1035 Grider Dr.</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Gallatin</b>	State <b>TN</b>	Zip Code <b>37006</b>		Date of Contribution <b>1/20/22</b>		Aggregate This Election
Occupation <b>Sumner County Trustee</b>						<b>\$150.<sup>00</sup></b>
Employer						
First Name <b>John &amp; Jeannie</b>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>Isbell</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<b>\$100.<sup>00</sup></b>
Address <b>108 Walton Trace N</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Hendersonville</b>	State <b>TN</b>	Zip Code <b>37075</b>		Date of Contribution <b>1/20/22</b>		Aggregate This Election
Occupation <b>Sumner County Assessor of Property</b>						<b>\$100.<sup>00</sup></b>
Employer						
First Name <b>Billy &amp; Dede</b>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>Richards</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$100.<sup>00</sup></b>
Address <b>1191 Fowler Ford Rd</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Portland</b>	State <b>TN</b>	Zip Code <b>37148</b>		Date of Contribution <b>1/20/22</b>		Aggregate This Election
Occupation <b>Interstate AC / Deputy Register</b>						<b>\$100.<sup>00</sup></b>
Employer <b>Sumner County Register of Deeds</b>						
First Name <b>Hank</b>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>Hemmerich</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$100.<sup>00</sup></b>
Address <b>439 Coleman Hill Rd.</b>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Rockvale</b>	State <b>TN</b>	Zip Code <b>37163</b>		Date of Contribution		Aggregate This Election
Occupation <b>Automotive</b>						<b>\$100.<sup>00</sup></b>
Employer <b>Self</b>						
5. TOTAL ITEMIZED CONTRIBUTIONS (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.)					<b>\$1,180.13</b>	

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Holly Hemmrich</b>			2. REPORT COVERING THE PERIOD		
			FROM: <b>1/16/22</b>	TO: <b>3/31/22</b>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount		
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 <b>Eddie.</b>		Middle Name		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution <b>\$ 300.<sup>00</sup></b>
Last Name/Organization Name <b>Anderson / Sanders Ferry Pizza</b>					
Address <b>125 Sanders Ferry Road</b>			Date of In-Kind Contribution <b>1/20/22</b>		Aggregate this Election
City <b>Hendersonville</b>		State <b>TN</b>	Zip Code <b>37075</b>		Description of In-Kind Contribution <b>Space Rental / Food Discount</b>
Occupation <b>Owner</b>		Employer			
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name					
Address			Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code		Description of In-Kind Contribution
Occupation		Employer			
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name					
Address			Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code		Description of In-Kind Contribution
Occupation		Employer			
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name					
Address			Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code		Description of In-Kind Contribution
Occupation		Employer			
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name					
Address			Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code		Description of In-Kind Contribution
Occupation		Employer			
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS					
(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.)					

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Holly Hemmrich</b>			2. REPORT COVERING THE PERIOD	
			FROM: <b>Yulez</b>	TO: <b>9/21/22</b>
			Amount	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <b>Campaign for Smyle Weatherford Sheriff</b>		<b>Campaign Contribution</b>	<b>\$250.<sup>00</sup></b>	
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <b>Big Poppa Corn</b>		<b>Campaign event Handouts</b>	<b>\$150.<sup>00</sup></b>	
Address <b>101B S. Russell St.</b>				
City <b>Portland</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State	Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <b>Sanders Ferry Pizza</b>		<b>Event Food</b>	<b>\$323.23</b>	
Address <b>125 Sanders Ferry Rd.</b>				
City <b>Hendersonville</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <b>Advantage Screen Printing</b>		<b>Campaign T-Shirts</b>	<b>\$341.43</b>	
Address <b>108 Midtown Ct.</b>				
City <b>Hendersonville</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State	Zip Code		
5. TOTAL ITEMIZED EXPENDITURES			<b>1064.66</b>	
(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.)				

## ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Holly Hemmrich</i>				2. REPORT COVERING THE PERIOD							
				FROM: <i>1/16/22</i>		TO: <i>3/31/22</i>					
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		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)			
Last Name/Organization Name											
Address				Loan Received For:			Date of Loan				
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election							
City				State	Zip Code	<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		Middle Name		First Name		Middle Name					
Last Name/Organization Name				Last Name/Organization Name							
Address				Address							
City		State	Zip Code	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 Code	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 Code	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 Code	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 Code	City		State	Zip Code				
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding							
4. Totals for all Loans (complete on last page of itemized loans)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)			
(Total loans received should also be shown in item 16. on summary page.)				<i>20,000.<sup>00</sup></i>		<i>- 0 -</i>	<i>- 0 -</i>	<i>20,000.<sup>00</sup></i>			
(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.)											

