

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. DATE OF REPORT <u>4/25/22</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>LATOYA HOLCOMB</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>110 HARPER ROAD PORTLAND, TN 37148 (615) 293-9931</u>		
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) <u>COUNTY COMMISSIONER DISTRICT 5</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>JESSIE ROGAN</u>
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input checked="" 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 <u>4/1/22</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>4/23/22</u>
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.  <u>Latoya Holcomb</u> <u>4/25/22</u> <u>Jessie Rogan</u> <u>4/25/22</u> signature of candidate      date      signature of political treasurer      date		
11. WITNESS SIGNATURE  <u>Justin Boulton</u> <u>4/25/22</u> <u>Justin Boulton</u> <u>4/25/22</u> signature of witness      date      signature of witness      date		
12. SUMMARY		
a. BALANCE ON HAND LAST REPORT .....		\$ <u>2796.<sup>00</sup></u>
b. TOTAL RECEIPTS THIS PERIOD .....		\$ <u>500.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD .....		\$ <u>145.95</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		\$ <u>3150.<sup>05</sup></u>
e. TOTAL LOANS OUTSTANDING .....		\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING .....		\$ <u>0</u>





# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>LATOYA HOLCOMB</b>			2. REPORT COVERING THE PERIOD FROM: <b>4/1/22</b> TO: <b>4/23/22</b>		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$300.00</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>JOHN</b>		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name <b>DOWELL</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <b>PO BOX 1352</b>				<input type="checkbox"/> Runoff (Local Elections Only)	<b>\$150.00</b>
City <b>GALLATIN</b>	State <b>TD</b>	Zip Code <b>37066</b>		Date of Contribution	
Occupation <b>OWNER / LANDLORD</b>					<b>\$150.00</b>
Employer <b>DOWELL RENTERPRISES</b>					
First Name <b>TRACEY</b>		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name <b>BELL</b>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <b>110 NEWTON LANE</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>GALLATIN</b>	State <b>TD</b>	Zip Code <b>37066</b>		Date of Contribution	
Occupation <b>ACCOUNTANT</b>					
Employer <b>JACKSON HEWITT</b>					
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	
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	
Occupation					
Employer					
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>\$300</b>	