

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>April 7, 2022</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>ROXIE E. KELSEY</u>		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>MAY 3, 2022</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>900 LAURA ST</u> <u>GALLATIN</u> <u>TN</u> <u>37066</u> <u>615-969-6771</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>SCHOOL BOARD DISTRICT 9</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>DIMICIA KELSEY</u>	
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 <u>JANUARY 16, 2022</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>MARCH 31, 2022</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>Roxie E. Kelsey</u> signature of candidate		<u>Dimicia Kelsey</u> signature of political treasurer	
<u>4-7-2022</u> date		<u>4-7-2022</u> date	
11. WITNESS SIGNATURE			
<u>Janika Bueck</u> signature of witness		<u>Janika Bueck</u> signature of witness	
<u>4-7-2022</u> date		<u>4-7-2022</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>0</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>5300.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>175.00</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>5125.00</u>	
		FILED AM PM	
e. TOTAL LOANS OUTSTANDING		\$ <u>0</u>	
		APR 08 2022	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	
		SUMNER COUNTY ELECTION COMMISSION	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) ROXIE E. KELSEY	14. REPORT COVERING THE PERIOD FROM: 1-16-22 TO: 3-31-2022
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 1180.00

b. Itemized Contributions (over \$100 from each source this period) \$ 4120.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 5300.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 5300.00

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)

_____	\$ _____
_____	\$ _____
NA	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 0

b. Itemized Expenditures (Over \$100 each payee this period) \$ 175.00

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 175.00

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 175.00

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 0

b. Itemized in-kind contributions (over \$100 from each source this period) \$ 0

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 0

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
ROXIE E. KELSEY				FROM: 1-16-22	TO: 3-31-2022
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name KELVIN		Middle Name L		Contribution Received For:	
Last Name/Organization Name THOMAS				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 1823 HARTSVILLE PIKE				<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN	State TN	Zip Code 37066		Date of Contribution 3-9-2022	Amount of Contribution 150.00
Occupation METER INSPECTOR				Aggregate This Election 150.00	
Employer CUMBERLAND ELECTRIC					
First Name EVERTON		Middle Name		Contribution Received For:	
Last Name/Organization Name CAMPBELL				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 2624 HARTSVILLE PIKE				<input type="checkbox"/> Runoff (Local Elections Only)	
City CASTALIAN SPRINGS	State TN	Zip Code 37031		Date of Contribution 3-14-2022	Amount of Contribution 500.00
Occupation REAL ESTATE AGENT				Aggregate This Election 500.00	
Employer C & C PROPERTIES					
First Name RICHARD		Middle Name D		Contribution Received For:	
Last Name/Organization Name BLACK				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 133 ROCKWOOD TERRACE				<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN	State TN	Zip Code 37066		Date of Contribution 3-15-2022	Amount of Contribution 150.00
Occupation BARBER				Aggregate This Election 150.00	
Employer SELF-EMPLOYED					
First Name MEG		Middle Name		Contribution Received For:	
Last Name/Organization Name HIBDON				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 160 Shiloh ROAD				<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN	State TN	Zip Code 37066		Date of Contribution 3-11-2022	Amount of Contribution 250.00
Occupation H.R. DIRECTOR				Aggregate This Election 250.00	
Employer GOODALL BUILDERS					
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.)					1050.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE KOXIE E. KELSEY				2. REPORT COVERING THE PERIOD FROM: 1-16-2022 TO: 3-31-2022			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 1050.00		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name SUMNER COUNTY DEMOCRATIC PARTY				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		2500.00	
Address P.O. BOX 51				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 3-13-2022		Aggregate This Election 2500.00	
Occupation							
Employer							
First Name Ronnie		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name TURNER				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		150.00	
Address 103 Oakland Dr.				<input type="checkbox"/> Runoff (Local Elections Only)			
City Gallatin		State TN	Zip Code 37066	Date of Contribution 3-19-2022		Aggregate This Election 150.00	
Occupation GENERAL CONTRACTOR							
Employer SELF EMPLOYED							
First Name COANIE		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name COOK				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		150.00	
Address 140 SHILOH RD				<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 3-21-2022		Aggregate This Election 150.00	
Occupation RETIRED							
Employer SUMNER COUNTY BOARD OF EDUCATION							
First Name Sylvia		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name SPANN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		120.00	
Address 919 Coarsey DR.				<input type="checkbox"/> Runoff (Local Elections Only)			
City Nashville		State TN	Zip Code 37217	Date of Contribution 3-26-2022		Aggregate This Election 120.00	
Occupation RETIRED							
Employer NISSAN AUTO							
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.)					3970.00		

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ROXIE E. KELSEY			2. REPORT COVERING THE PERIOD FROM: 1-16-2022 TO: 3-31-2022		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 3970.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name AIBERT	Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name STRAUTHER			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		150.00
Address 205 WITHERSPOON AVE			<input type="checkbox"/> Runoff (Local Elections Only)		
City GALLATIN	State TN	Zip Code 37066	Date of Contribution 3-30-2022		Aggregate This Election 150.00
Occupation Mortician					
Employer STRAUTHER & WHITE FUNERAL HOME					
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 (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.)				4120.00	

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Roxie E. Kelsey				2. REPORT COVERING THE PERIOD FROM: 1-16-22 TO: 3-31-2022			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0		
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				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution		NA	
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				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution		NA	
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				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution		NA	
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				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution		NA	
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				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution		NA	
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 2b. of summary.)					0		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ROXIE E. KELSEY		2. REPORT COVERING THE PERIOD FROM: 1-16-22 TO: 3-31-2022	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name LERICO	Middle Name	Purpose of Expenditure ELECTION ASSETS SOCIAL MEDIA GRAPHIC 4x6 CARD YARD SIGN	Amount of Expenditure 175.00
Last Name/Business Name BRITTON - Britton Designs			
Address 106 BRENTRIDGE DR			
City ANTIOCH	State TN	Zip Code 37013	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		/	/
Address			
City	State	Zip Code	
N/A			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		/	/
Address			
City	State	Zip Code	
N/A			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		/	/
Address			
City	State	Zip Code	
N/A			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		/	/
Address			
City	State	Zip Code	
N/A			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		/	/
Address			
City	State	Zip Code	
N/A			
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.)			175.00

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Roxie E. Kelsey				2. REPORT COVERING THE PERIOD FROM: 1-16-2022 TO: 3-31-2022					
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				Date of Loan	
City		State		Zip Code		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <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				Address					
City		State		Zip Code		City		State	
City		State		Zip Code		City		State	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Address					
City		State		Zip Code		City		State	
City		State		Zip Code		City		State	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Address					
City		State		Zip Code		City		State	
City		State		Zip Code		City		State	
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Address					
City		State		Zip Code		City		State	
City		State		Zip Code		City		State	
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.)									
(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.)									

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ROXIE E. KELSEY				2. REPORT COVERING THE PERIOD			
				FROM: 1-16-2022		TO: 3-31-2022	
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		—	—	—	—
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							
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							
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	0	0	0