## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

# For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT  RPAIL 25, 2022	2. NAMEOFCA	ANDIDATE OR C	COMMITTEE TO SEV		
2.b. IF COMMITTEE, NAME OF CANDIDATE	1 - 7-	<u> </u>	7	3. ELECTION D	DATE:
, , , , , , , , , , , , , , , , , , ,				MAY	3, 2022
4.a. CAMPAIGN ADDRESS AND PHONE			· · ·	1 1117	J. 2007
Street or Rural Route	City	*	State	Zip Code	Phone
900 LAURA St.	GALLA	tiN	TN	37066	615.969.6771
4.b. CANDIDATE'S HOME ADDRESS (if different			D	7: 0 !	
Street or Rural Route	City		State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME (	OF POLITICAL	TREASURER (ma	ay be candidate)
SCHOOL BOARD DISTRICT	9	Dior	ncia	Kelsey	
7. CATEGORY OR REPORT (Check one)				<del>, -</del>	7-1-DF1
FIRST SECOND THIRD	FOURTH		PRE-	□ MID-YEA	R YEAR-END
QUARTER QUARTER QUARTER	QUARTER	PRIMARY	GENERAL	SUPPLEMEN	
8.a. BEGINNING DATE OF REPORTING PERIOD				ORTING PERIOD	
HPMI 1. 2022		Apa	1 23.	2022	
9. (Check one)					
a. This campaign is exempt from detaile					\$1,000 or less AND expendi-
tures total \$1,000 or less for this repo	rting period. (Comp	plete items 12d	., 12e. and 12f.	)	
b. This campaign is required to file a de	tailed financial discl	osure because	contributions (i	ncluding in-kind) r	eceived total more than \$1,000
and/or expenditures total more than \$	1,000 for this repor	ting period.			
10. I/we do solemnly swear or affirm that the in					
accurate accounting of campaign contribution  Financial Disclosure Act. Additionally, I/we					
benefit of the candidate or for any other nor					
1.1. 1. 1.1.	11 00 -	7	$\rightarrow$	· 12.000	
Signature of candidate	4-25-1	2 C	<u> Timia</u>	a Kelse of political treasur	
eignature of candidate	date		signature	of political treasur	date date
11 MITNESS SIGNATURE					
11. WITNESS SIGNATURE				1.	
Elsones Telas	166 250 1772	, ,	Bonn	7.1.1.	V1-45-2011
signature of witness	date	كر	signa	ature of witness	date
/					
12. SUMMARY		FILED			
a. BALANCE ON HAND LAST REPORT	Adr	P PLEL	PM	\$ 5125.0	00
		*******************			<del></del>
b. TOTAL RECEIPTS THIS PERIOD	AF	R 2 6 202	2	\$ <u>1030.</u> 1	00
		,		.Fr	
c. TOTAL DISBURSEMENTS THIS PERIOD.	SUM Electi	INER COUNT ON COMMIS	Y	\$	<del></del>
d. BALANCE ON HAND (12.a. plus 12.b. n					: 6155.00
1. 27.00 to 2011 mate (12.0. pius 12.0. li		+****************			\$
e. TOTAL LOANS OUTSTANDING					. 0
C. TOTAL ZOTAG OUTGIANDING	***************************************	***************************************			φ
f. TOTAL OBLIGATIONS OUTSTANDING					. 6
TO THE GOLD WHO HAD IN THE INTERNATION OF THE I	***************************************	***************************************	************************	*************************	ф

#### SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
KOXIE EI KELSEY	FROM: 41-2037 TO: 4-33-3033
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 150.00
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>880.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ [030.00]
16. LOANS RECEIVED THIS REPORTING PERIOD	s_6_
17. INTEREST RECEIVED THIS REPORTING PERIOD	ı
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ [030.00
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	e.g., printing, postage, gasoline)
\$	
\$	
\$	
\$	<b>\</b>
\$ 111	X
\$ TV	<del></del>
	<del>,</del>
\$ \$	
\$	
Total of Expenditures (\$100 or less each payee)	\$6
b. Itemized Expenditures (Over \$100 each payee this period)	\$_ <del>.</del>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>-</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$_ <del>-</del>
22.IN-KIND CONTRIBUTIONS	<b>t</b>
a. Unitemized in-kind contributions (\$100 or less from each source this period)	
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ <u>-</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.	b.) \$ <u>#</u>
23. OBLIGATIONS	6-
a. Unitemized Obligations Outstanding (\$100 or less each)	\$
b. Itemized Obligations Outstanding (Over \$100 each)	\$\$
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i ite	em 12.f.)\$

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Page \_\_\_\_\_ of \_\_\_\_

### **ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE ROXIE E. LEI	ارم		2	REPORT COVERI	
•	· 1				Amount
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTI					1 0
COMPLETE THE APPROPRIATE ITEMS FOR EA  First Name	iddle Name	_	Contributions totaling more than \$		Amount of Contribution
JOHN	induic Hairia	R	4.4		, south of Bollshaudi.
Last Name/Organization Name Pellegrin			Primary Election	J General Election	
Address 113 WEST Mair	S	-,	Runoff (Local Election	500.00	
City Gallatin	State	7066 37066	Date of Contribution		Aggregate This Election
accupation Atturney			4-13-202	C00.00	
John Pellegrin AH	orne	4			500.00
First Name	Middle Nam	e	Contribution Received F	or:	Amount of Contribution
Last Name/Organization Name	<u> </u>		Primary Election	General Election	
Address 919 Coarsey DR	- 1		Runoff (Local Election	ns Only)	380.00
City Nashville	State	Zip Code 37317	Date of Contribution		Aggregate This Election
Occupation Retried			4-25-26		
Nissan Auto				500.00	
First Name	Middle Nami	3	Contribution Received F	or:	Amount of Contribution
Last Name/Organization Name			Primary Election	General Election	
Address		<del></del>	Runoff (Local Electio		
City	State	Zip Code	Date of Contribution	Aggregate This Election	
Occupation		1			
Employer			-		
First Name	Middle Nam	e	Contribution Received For	-	Amount of Contribution
Last Name/Organization Name	<u></u>		Primary Election	General Election	
Address		Runoff (Local Electio			
City	State	Zip Code	Date of Contribution	,	Aggregate This Election
Occupation					
Employer					
TOTAL ITEMIZED CONTRIBUTIONS     (Carry forward to item 3. of next page if additional pages     (If this is the last page of contributions, this amount must					880-00

#### **ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE**

					NG THE PERIOD TO: 4-23-30-3-
	TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				
TOTAL ITEMIZED IN-KIND CONTRIBUTION     COMPLETE THE APPROPRIATE ITEMS FOR EA					Itributor during the period)
	S INTERIOR CONTINED	In-Kind Contribution Receive		Value of In-Kind Contribution	
	First Name Middle Name			General Election	value of it-rolls contitiouson
Last Name/Organization Name			Runoff (Local Election	is Only)	
Address			Date of In-Kind Contribution	( )	ggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	N	
Occupation Employer				\	
	1			15	A
First Name	Middle Name	<u>.</u>	In-Kind Contribution Receiv Primary Election	ed For: ] General Election	Value of In-Kind Contribution
Last Name/Organization Name			Runoff (Local Election	ns Only)	
Address			Date of In-Kind Contribution	1/	Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	$-\omega$	J
Occupation Employer	1			•	
First Name	Middle Name		In-Kind Contribution Receiv		Value of In-Kind Contribution
Last Name/Organization Name		Runoff (Local Election			
Address			Date of In-Kind Contribution		Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	M,	<u></u>
Occupation Employer	Occupation Employer		1	1	
					, .
First Name	Middle Name	3	In-Kind Contribution Received Primary Election	/ed For: ☐ General Election	Value of In-Kind Contribution
Last Name/Organization Name			Runoff (Local Election		
Address			Date of in-Kind Contribution	na Only)	Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	<del></del>	<u> </u>
Occupation Employer			-	N	
				•	
First Name	Middle Name	<del></del>	In-Kind Contribution Rece		Value of In-Kind Contribution
Last Name/Organization Name	<u> </u>		Primary Election	7,	
Address \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Date of In-Kind Contribution	ns Only)	Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution	13	1
Occupation Employer			-	•	
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIO (Carry forward to item 3. of next page if additional pages ((title in the lest page of its kind contributions this arrow)	s of this form are				<del></del>
(If this is the last page of in-kind contributions, this amou	unt must be sho	wn in item 22b. of summar	y.)		1

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITT ROXIEE	REPORT COVERING THE PERIOD  OM: 4-1-23 70: 4-23・3037			
3. TOTAL ITEMIZED CAMPAIGN EXPEN	Amount			
COMPLETE THE APPROPRIATE ITEMS F				payee during the period)
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		······		
Address				
City	State	Zip Code		
First Name	Middle Name	е	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name	/			
Address	Address			
City	State	Zip Code		
First Name	Middle Name	2	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name	<i></i>			
Address		•		
City	State	Zip Code		
First Name	Middle Name	В	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name				
Address				
City	State	Zip Code		
First Name	Middle Nami	e	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name	,			
Address				
City	State	Zip Code		
5. TOTAL ITEMIZED EXPENDITURE (Carry forward to item 3. of next page if addition	nal pages of this form a	re used.)		<b>D</b>
(If this is the last page of expenditures, this am	ount must be shown in	item 19b. of summar	y.)	

#### **ITEMIZED STATEMENT OF LOANS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE		· · · · ·			2. REF	PORT COVER!	NG THE PERIOD
ROXIE E. KE	rsev				FROM	2022	10: 4-23-20>
3. COMPLETE THE APPROPRIATE ITEMS F		EMIZED LOAN (	loans totaling mo	re than \$100 from	any source duri	ng the period)	1 0.0 -
Complete the Following for the Source of the Loan							
First Name Middle Nar	ne	Outstanding l (Beginning		Loans Received	Loan Paymen	I .	anding Loan Balance (End of Period)
Last Name/Organization Name	,				1		
Address		Loan Receiv	ed For:			ate of Loan	
<i>N</i> '		☐ Primar		☐ General Elect	tion $M$	1	
City \ State	Zip Code	☐ Runoff	(Local Elections O	nly)	,		1
List All Endo	rsers or Guarar	ntors for Above Loa	n (If more spac	e is needed ple	ase attach a p	age)	
First Name	Middle Name		First Name			Middle I	Name
Last Name/Organization Name			Last Name/Orga	anization Name	<b>)</b> (		
Address		<del></del>	Address		M	1	
City	State	Zip Code	City			State	Zip Code
Amount Guaranteed Outstanding			Amount Guaran	teed Outstanding			•
First Name	Middle Name	<del></del>	First Name		=-	Middle	Name
Last Name/Organization Name	.1		Last Name/Org	anization Name		N/	
Address			Address		N	K	
City	State	Zip Code	City		14	State	Zip Code
Amount Guaranteed Outstanding			Amount Guaran	nteed Outstanding			
First Name	Middle Name		First Name			Middle	a Name
Last Name/Organization Name	•		Last Name/Org	anization Name	-	1	
Address			Address		M		
City	State	Zip Code	City		1	State	Zip Code
Amount Guaranteed Outstanding	-		Amount Guarar	nteed Outstanding			
First Name	Middle Name		First Name	<del> </del>		Middle	Name
Last Name/Organization Name	<u> </u>		Last Name/Org	ganization Name	1	K	
Address			Address		M	+ `	
City	State	Zip Code	City		1	State	Zip Code
Amount Guaranteed Outstanding			Amount Guarai	nteed Outstanding			
Totals for all Loans (complete on last page of Total loans received should also be shown in item 16. of Total loan payments should also be shown in item 20. of Total loan payments.	n summary page. n summary page.	) )	Outstanding Lo (Beginning o		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
(Total outstanding loan balance should also be shown in it	em 12.e. on front	page.)			U		



#### **ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD						
			10.4-4 # B-I	FROM: 41-20		-93-9032	
<ol> <li>COMPLETE THE APPROPRIATE ITEMS F OBLIGATION (obligations totaling more than</li> </ol>			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Reriod	Outstanding Balance (End of Period)	
person/vendor at the end of the reporting per	eriod)	<b>,</b>	1	1	D	0	
First Name	Middle Nar	пе					
Last Name/Business Name	ļ		· ·				
Address							
113	<b>,</b>					·	
City	State	Zip Code					
Description of Obligation	<u> </u>	_L		I,		<u> </u>	
First Name	Middle Na	πe		1		· · · · · · · · · · · · · · · · · · ·	
				]			
Last Name/Business Name					•		
Address							
City	State	Zip Code	-				
Description of Obligation				<u> </u>		]	
First Name	Middle Na	me					
Last Name/Business Name	<u> </u>		<u>-</u>				
Address							
Audiess							
City	State	Zip Code					
Description of Obligation	•					<u> </u>	
First Name	Middle Na	me					
Last Many (Duris on Many)			_				
Last Name/Business Name							
Address							
City	State	Zip Code	4				
Description of Obligation	<u> </u>	.1		1			
First Name	Middle Na	me					
Last Name/Business Name	1	<del></del>					
Address							
City	State	Zip Code	4				
	Ciato	Zip Good					
Description of Obligation							
4. TOTALS	· · · · · · · · · · · · · · · · · · ·			^		A	
(Total from Outstanding Balance - (End of Period) in item 23b. on summary page.)	column mus	st also be shown	A	A	1	1	
Land and an arminary bagary		·····					