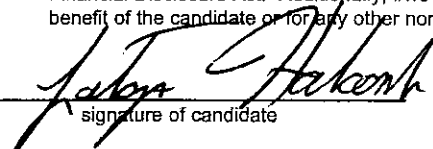

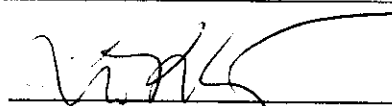


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF CANDIDATE OR COMMITTEE LaToya Holcomb		
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE 8-04-2022		
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route 110 Harper Road	City Portland	State TN	Zip Code 37148 Phone 615293-9931
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) District 5		6. NAME OF POLITICAL TREASURER (may be candidate) Jessie Rogan	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER	<input checked="" 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 April 23, 2022		8.b. ENDING DATE OF REPORTING PERIOD June 30, 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.			
 signature of candidate		 signature of political treasurer	
7-11-22 date		7/11/22 date	
11. WITNESS SIGNATURE			
 signature of witness		7/11/2022 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	FILED		\$ 1748.91
b. TOTAL RECEIPTS THIS PERIOD	AM	PM	\$ 3370
c. TOTAL DISBURSEMENTS THIS PERIOD	JUL 11 2022		\$ 2322.91
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	SUMNER COUNTY		\$ 2796
ELECTION COMMISSION			
e. TOTAL LOANS OUTSTANDING			\$ 0
f. TOTAL OBLIGATIONS OUTSTANDING			\$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE LETITIA HOLCOMB		2. REPORT COVERING THE PERIOD FROM: 4/23/22 TO: 6/30/22	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) Amount			
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name IREMAINE		Middle Name	
Last Name/Organization Name SMITH		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 100 SANTA MONICA BLVD		<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN	State TN	Zip Code 37066	Amount of Contribution \$500.00
Occupation MUSIC ARTIST		Date of Contribution	Aggregate This Election
Employer EDUCATED VISION INC			
First Name AMANDA		Middle Name	
Last Name/Organization Name HITE		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 115 GASTON ST		<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN	State TN	Zip Code 37066	Amount of Contribution \$500.00
Occupation MANAGEMENT		Date of Contribution	Aggregate This Election
Employer STAR			
First Name ANDREW		Middle Name	
Last Name/Organization Name GETTER		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 102 WATCHER DR		<input type="checkbox"/> Runoff (Local Elections Only)	
City HENDERSONVILLE	State TN	Zip Code 37075	Amount of Contribution 200.00
Occupation ACTUARY		Date of Contribution	Aggregate This Election
Employer Humana			
First Name MICHAEL		Middle Name	
Last Name/Organization Name STARK		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 1049 FIVE CODES TREE		<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN	State TN	Zip Code 37066	Amount of Contribution \$135.00
Occupation N/A		Date of Contribution	Aggregate This Election
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.)			

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE LATOYA HOLCOMB			2. REPORT COVERING THE PERIOD FROM: 4/23 TO: 6/30/22		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name JACK		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution \$200.00
Last Name/Organization Name BELL					
Address 710 NEWTON LANE				Date of Contribution	Aggregate This Election
City GALLATIN	State TN	Zip Code 37066			
Occupation					
Employer SOCIAL SECURITY					
First Name TRACEY		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution \$150.00
Last Name/Organization Name BELL					
Address 710 NEWTON LANE				Date of Contribution	Aggregate This Election
City GALLATIN	State TN	Zip Code 37066			
Occupation ACCOUNTANT					
Employer JACKSON HEWITT					
First Name KAYLE		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution \$500
Last Name/Organization Name SMITH					
Address 710 NEPTUNE				Date of Contribution	Aggregate This Election
City HENDERSONVILLE	State TN	Zip Code 37025			
Occupation					
Employer SELF - EMPLOYED					
First Name		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address				Date of Contribution	Aggregate This Election
City	State	Zip Code			
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.)					

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>LATOYA Holcomb</u>	14. REPORT COVERING THE PERIOD FROM: <u>4-23-22</u> TO: <u>6-30-22</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>1210</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>2035</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>3245</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</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>3245</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>INTERNET</u>	\$ <u>74.28</u>
<u>PRINTING</u>	\$ <u>74.47</u>
<u>POSTAGE</u>	\$ <u>60.50</u>
<u>PORTLAND CHAMBER OF COMMERCE</u>	\$ <u>45.00</u>
<u>SUMNER COUNTY - HIGHLAND</u>	\$ <u>75.00</u>
<u>TRACTOR SUPPLY FUNDRAISE</u>	\$ <u>59.91</u>
<u>WALMART</u>	\$ <u>29.78</u>
.....	\$
.....	\$
Total of Expenditures (\$100 or less each payee)	\$ <u>418.94</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>1903.97</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>0</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>2322.91</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>2322.91</u>



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE LATOYA HOLCOMB		2. REPORT COVERING THE PERIOD FROM: 4/13 TO: 6/30/22	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name KAYCE SOUTH	Middle Name	Purpose of Expenditure POSTAL FORMS	Amount of Expenditure \$ 723.02
Last Name/Business Name DNI CORP			
Address 711 SPENCE LANE			
City NASHVILLE	State TN	Zip Code 37217	
First Name	Middle Name	Purpose of Expenditure SIGNS	Amount of Expenditure \$ 450.11
Last Name/Business Name MR. SIGN MAN			
Address			
City	State	Zip Code	
First Name	Middle Name	Purpose of Expenditure FUNDRAISER	Amount of Expenditure \$ 151.78
Last Name/Business Name PISTOL PETALS EVENT			
Address			
City	State	Zip Code	
First Name	Middle Name	Purpose of Expenditure SIGNS	Amount of Expenditure \$ 252.91
Last Name/Business Name ASAP PRINTING			
Address			
City	State	Zip Code	
First Name	Middle Name	Purpose of Expenditure FUNDRAISER (SNACKS)	Amount of Expenditure \$ 167.15
Last Name/Business Name WIK KNOCKS			
Address			
City	State	Zip Code	
First Name	Middle Name	Purpose of Expenditure RETURN FUNDS	Amount of Expenditure \$ 159.00
Last Name/Business Name INATION BUILDERS			
Address			
City	State	Zip Code	
5. TOTAL ITEMIZED EXPENDITURES			
<small>(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.)</small>			