

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>July 10, 2022</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Leslie R. Schell</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>8-4-2022</u>	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route <u>1558B Binkley Branch</u>		City <u>Hendersonville</u>	State <u>TN</u>
		Zip Code <u>37075</u>	Phone <u>615.452.8399</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 Commission District 14</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Cullen Bubba Schell</u>	
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 <u>April 23, 2022</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>June 30, 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>[Signature]</u> signature of candidate		<u>7/10/22</u> date	<u>[Signature]</u> signature of political treasurer
			<u>7-11-22</u> date
11. WITNESS SIGNATURE			
<u>[Signature]</u> signature of witness		<u>7/10/22</u> date	<u>[Signature]</u> signature of witness
			<u>7-11-22</u> date
12. SUMMARY			
FILED			
a. BALANCE ON HAND LAST REPORT AM	PM	\$ <u>305.82</u>
b. TOTAL RECEIPTS THIS PERIOD <u>JUL 11 2022</u>		\$ <u>1200.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD <u>SUMNER COUNTY ELECTION COMMISSION</u>		\$ <u>\$45</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)			\$ <u>1460.82</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 Leslie R. Schell				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		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200.00	
City		State		<input type="checkbox"/> Runoff (Local Elections Only)			
Occupation		Zip Code		Date of Contribution		200.00	
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500.00	
City		State		<input type="checkbox"/> Runoff (Local Elections Only)			
Occupation		Zip Code		Date of Contribution		500.00	
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500.00	
City		State		<input type="checkbox"/> Runoff (Local Elections Only)			
Occupation		Zip Code		Date of Contribution		500.00	
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
City		State		<input type="checkbox"/> Runoff (Local Elections Only)			
Occupation		Zip Code		Date of Contribution			
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS					1200.00		
(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.)							