

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>October 10, 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 <u>900 LAURA ST.</u>	City <u>Gallatin</u>	State <u>TN</u>	Zip Code <u>37066</u> Phone <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>Dionicia Kelsey</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER	<input type="checkbox"/> SECOND QUARTER	<input checked="" 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>July 26, 2022</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>September 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>Roxie E. Kelsey</u> signature of candidate		<u>Dionicia R. Kelsey</u> signature of political treasurer	
<u>10-11-2022</u> date		<u>10-10-2022</u> date	
11. WITNESS SIGNATURE			
<u>Wilson Kelsey</u> signature of witness		<u>Wilson Kelsey</u> signature of witness	
<u>10-11-2022</u> date		<u>10-10-2022</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	\$ <u>3790.26</u>		
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>7.00</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>3797.26</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	FILED		\$ <u>0</u>
e. TOTAL LOANS OUTSTANDING	OCT 11 2022		\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING	SUMNER COUNTY ELECTION COMMISSION		\$ <u>0</u>



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE KOXIE KELSEY			2. REPORT COVERING THE PERIOD FROM: 7-26-2021 TO: 9-30-2022		
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		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name DNI CORP				Campaign Mailers	937.73
Address 711 Spencer Lane					
City Nashville	State TN	Zip Code 37217			
First Name		Middle Name			
Last Name/Business Name SUMNER COUNTY Democratic Party				non-Profit Donation	1000.00
Address P.O. Box 51					
City Gallatin	State TN	Zip Code 37066			
First Name Kacey		Middle Name			
Last Name/Business Name Smith				T-Shirt Campaign May 3, 2022 Reimbursement	241.09
Address 210 Neptune Drive					
City Hendersonville	State TN	Zip Code 37075			
First Name LATOYA		Middle Name			
Last Name/Business Name Holcum B				November 8, 2022 Election Campaign Contribution	360.00
Address 110 HARPER RD					
City Portland	State TN	Zip Code 37148			
First Name		Middle Name			
Last Name/Business Name Emmanuel Temple Inc.				Global Missions Non-Profit Donation	500.80
Address 119 Center St.					
City Old Hickory	State TN	Zip Code 37138			
First Name		Middle Name			
Last Name/Business Name Stay Warm Shelter				Community Non Profit Donation	500.00
Address 290 E. Winchester St.					
City Gallatin	State TN	Zip Code 37066			
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.)					



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Roxie E. Kelsey			2. REPORT COVERING THE PERIOD	
			FROM: 7-26-2022	TO: 9-30-2022
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 3539.62
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name Steven	Middle Name	Purpose of Expenditure November 8, 2022 Election Campaign Contribution		Amount of Expenditure 200.00
Last Name/Business Name CARR				
Address 319 RANDOLPH ST				
City Gallatin	State Tn	Zip Code 37066		
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	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	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		
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.)				3739.62

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Roxie E. Kelsey				2. REPORT COVERING THE PERIOD FROM: 7-26-2022 TO: 9-30-2022					
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				NA					
Address				Loan Received For:			Date of loan		
City				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)			NA		
State				Zip Code					
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				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
4. Totals for all Loans (complete on last page of itemized loans) (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.e. on front page.)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
				0		0	0	0	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<div style="font-size: 1.2em; font-family: cursive;">ROXIE E. KESEY</div>				FROM: 7-26-2022		TO: 9-30-2022	
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					
NA							
Description of Obligation							
First Name	Middle Name			—	—	—	—
Last Name/Business Name							
Address							
City	State	Zip Code					
NA							
Description of Obligation							
First Name	Middle Name			—	—	—	—
Last Name/Business Name							
Address							
City	State	Zip Code					
NA							
Description of Obligation							
First Name	Middle Name			—	—	—	—
Last Name/Business Name							
Address							
City	State	Zip Code					
NA							
Description of Obligation							
4. TOTALS				0	0	0	0
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Roxie E. Kelsey				2. REPORT COVERING THE PERIOD			
				FROM: 9-26-22	TO: 9-30-22		
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		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				NA			
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				NA			
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				NA			
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				NA			
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				NA			
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS							
(Carry forward to item 3. of next page if additional pages of this form are used.)						0	
(If this is the last page of contributions, this amount must be shown in item 15b. of summary.)							

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ROXIE E. Kelsey				2. REPORT COVERING THE PERIOD FROM: 7-26-2019 TO: 9-30-2022			
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			
				<input type="checkbox"/> Runoff (Local Elections Only)			
Address NA				Date of In-Kind Contribution NA		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution NA			
Occupation		Employer					
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			
				<input type="checkbox"/> Runoff (Local Elections Only)			
Address NA				Date of In-Kind Contribution NA		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution NA			
Occupation		Employer					
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			
				<input type="checkbox"/> Runoff (Local Elections Only)			
Address NA				Date of In-Kind Contribution NA		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution NA			
Occupation		Employer					
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			
				<input type="checkbox"/> Runoff (Local Elections Only)			
Address NA				Date of In-Kind Contribution NA		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution NA			
Occupation		Employer					
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			
				<input type="checkbox"/> Runoff (Local Elections Only)			
Address NA				Date of In-Kind Contribution NA		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution NA			
Occupation		Employer					
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 22b. of summary.)					Amount 0		

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Roxie E. Kelsey</u>	14. REPORT COVERING THE PERIOD FROM: <u>7-26-22</u> TO: <u>9-30-2022</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 7.00

b. Itemized Contributions (over \$100 from each source this period) \$ 0

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 7.00

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.) \$ 7.00

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)

<u>ACT BLUE FEE</u>	\$	<u>2.68</u>
<u>ROXIE E. KELSEY # 1011</u>	\$	<u>54.96</u>
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	

Total of Expenditures (\$100 or less each payee) \$ ^{OK} ~~2.68~~ 57.64

b. Itemized Expenditures (Over \$100 each payee this period) \$ 3739.62

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 3797.26

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 3797.26

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

