# **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

For State and Local Candidates
For Single-Candidate Committees

Jan 17.2023		ANDIDATEOR	COMMITTEE		
	Deb	ovah	Holnes	3	
2.b. IF COMMITTEE, NAME OF CANDIDATE	7 795,000			3. ELECTION DATE	E
Deborah Holmus				Aug 4.2	022
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	Cit.	1 355	01.1		
	City	loL.	State	Zip Code	Phone
4.b. CANDIDATE'S HOME ADDRESS (if different t		latin	TN	37dels	415243.768
	City		State	Zip Code	Phone
2134 Long Hollow Pike	Galle	atin	TW	37066	Le15 243-7681
5. OFFICE SOUGHT (include district number, if a	pplicable)	6. NAME	OF POLITICA	L TREASURER (may be	
County Commission Dist	: 12	J	acey 1	tolnus	
7. CATEGORY OR REPORT (Check one)		7		1011-5	
FIRST SECOND THIRD	FOURTH	PRE-	PRE-	MID-YEAR	YEAR-END
QUARTER QUARTER QUARTER	QUARTER	PRIMARY	GENERAL	SUPPLEMENTAL	SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDIN	G DATE OF REF	PORTING PERIOD	
OCH 1 LOLL		JUV	1 15,	2023	
9. (Check one)					
<ul> <li>a. This campaign is exempt from detailed tures total \$1,000 or less for this report</li> </ul>	disclosure because	se contribution	s (including in-	-kind) received total \$1,0	000 or less AND expendi-
<ul> <li>b.  This campaign is required to file a deta and/or expenditures total more than \$1</li> </ul>	iled financial discl	osure because	contributions	(including in-kind) recei-	ved total more than \$1,000
and/or experiditures total more than \$1	,000 for this repor	ung period.			
10. I/we do solemnly swear or affirm that the info	ermation contained	d in this same	oign financial	dicalcours remark in tour	and that this are at its
accurate accounting of campaign contribution	s and expenditure	s required to	be reported by	the candidate committe	e by the Campaign
Financial Disclosure Act. Additionally, I/we so benefit of the candidate/or for any other nonposition.	vear or affirm that	no campaign	a a sadulla coli a a a la		
Donoit of the bandidate of for any other horizon	olitical nurnose as	defined by th	e federal interr	nave been expended for	the personal financial
0 0 0 0	olitical purpose as	defined by th	e federal interr	nave been expended for nal revenue code.	the personal financial
Debough Holmer	)-17.22	defined by th	e federal interr	nave been expended for nal revenue code.	the personal financial
Albough Holmes signature of candidate	olitical purpose as  1-17.23 date	defined by th	e federal interr	nave been expended for nal revenue code.  ### To the code is a code in the code is a code in the code	the personal financial  1-17-23 date
Reborah Helmes	1-17.23	defined by th	e federal interr	Momus	1-17-23
Reborah Helmes	1-17.23	defined by th	e federal interr	Momus	1-17-23
Albough Holmes signature of candidate	1-17.23	defined by th	e federal interr	Momus	1-17-23
signature of candidate  11. WITNESS SIGNATURE	1-17.23	defined by th	e federal interr	Momus	1-17-23
signature of candidate  11. WITNESS SIGNATURE	1-17.23	defined by th	e federal interr	Momus	1-17-23
signature of candidate  11. WITNESS SIGNATURE signature of witness	1-17-23 date	defined by th	e federal interr	And revenue code.  Howay e of political treasurer	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE	1-17-23 date	defined by th	e federal interr	And revenue code.  Howay e of political treasurer	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE signature of witness	1-17-23 date 1-17-23 date	defined by the	e federal interr	And revenue code.  Howay e of political treasurer	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE  signature of witness  12. SUMMARY  a. BALANCE ON HAND LAST REPORT	1-17-23 date  1-17-33 date	defined by the	e federal interr	And revenue code.  Howay e of political treasurer	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE  signature of witness  12. SUMMARY	1-17-23 date  1-17-33 date	defined by the	e federal interr	And revenue code.  Howay e of political treasurer	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE  signature of witness  12. SUMMARY  a. BALANCE ON HAND LAST REPORT  b. TOTAL RECEIPTS THIS PERIOD	1-17-23 date  1-17-23 date	defined by the	e federal interr	And revenue code.  Howay e of political treasurer	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE signature of witness  12. SUMMARY  a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD	1-17-23 date  1-17-23 date  FIL	ED	e federal interr	and revenue code.  Howay e of political treasurer  and the second of political treasurer  and th	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE signature of witness  12. SUMMARY  a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD	1-17-23 date  1-17-33 date  FIL	ED Pr	e federal interr	and revenue code.  Howay e of political treasurer  and the second of political treasurer  and th	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE  signature of witness  12. SUMMARY  a. BALANCE ON HAND LAST REPORT  b. TOTAL RECEIPTS THIS PERIOD  c. TOTAL DISBURSEMENTS THIS PERIOD	1-17-23 date  1-17-23 date  FIL	ED Pr	e federal interr	and revenue code.  Howay e of political treasurer  and the second of political treasurer  and th	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE signature of witness  12. SUMMARY  a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD	JAN 1	DOWNTY	e federal interr	and revenue code.  Howay e of political treasurer  and the second of the	1-17-23 date
signature of candidate  11. WITNESS SIGNATURE signature of witness  12. SUMMARY a. BALANCE ON HAND LAST REPORT b. TOTAL RECEIPTS THIS PERIOD c. TOTAL DISBURSEMENTS THIS PERIOD d. BALANCE ON HAND (12.a. plus 12.b. mir	JAN 1	DOWNTY	e federal interr	and revenue code.  Howay e of political treasurer  and the second of the	1-17-23 date

#### **SUMMARY PAGE - CANDIDATE**

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD FROM: (V-)-22 TO: )-15, 23
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	11/00/11/20
	· O
a. Unitemized Contributions (\$100 or less from each source this period)	<b>t</b>
b. Itemized Contributions (over \$100 from each source this period)	A
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 1	A
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u></u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	s
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>************************************</u>
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by categ	ory - e.g., printing, postage, gasoline)
On who can also also also also also also also also	2 44
Campaigh donation \$ 71	). 41
tor election tavity s_	
\$	
\$	
\$	
\$	
\$	
•	
	all
Total of Expenditures (\$100 or less each payee)	\$ 70.99
b. Itemized Expenditures (Over \$100 each payee this period)	\$ U
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$70.44
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 6
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c	20 1111
22.IN-KIND CONTRIBUTIONS	,
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)	
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. ar	nd 22.b.)
23. OBLIGATIONS	
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 show	n i item 12.f.)\$

Page \_

SS-1133 (Rev. 4/02)

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

NAME OF CANDIDATE OR COMMI	TTEE				ERING THE PERIOD		
			35.	FROM:	TO:		
3. TOTAL ITEMIZED CAMPAIGN CON	TRIBUTIONS F	ROM PRECEDING	PAGE (enter \$0 if first itemized p	page)	Amount		
4. COMPLETE THE APPROPRIATE ITEMS	S FOR EACH ITEM	MIZED CONTRIBUTION	ON (contributions totaling more than	\$100 from any contribu	utor)		
First Name	Middle N	ame	Contribution Received For:				
Last Name/Organization Name			Primary Election	General Election			
Address	A.		Runoff (Local Election	Runoff (Local Efections Only)			
City	State	Zip Code	Date of Contribution	Date of Contribution			
Occupation							
Employer			_ /				
First Name	Middle N	ame	Contribution Received For	·	Amount of Contribution		
Last Name/Organization Name			Primary Election	☐ General Election			
Address			Runoff (Local Electio	ns Only)			
City	State	Zip Code /	Date of Contribution		Aggregate This Election		
Occupation							
Employer							
First Name	Middle Na	ame /	Contribution Received For	Contribution Received For:  Primary Election General Election  Runoff (Local Elections Only)			
Last Name/Organization Name			Primary Election				
Address			Runoff (Local Election				
City	State	Zip Code	Date of Contribution	141	Aggregate This Election		
Occupation							
Employer							
First Name	/ Middle Na	ame	Contribution Received For:		Amount of Contribution		
Last Name/Organization Name			☐ Primary Election ☐	General Election			
Address	/		Runoff (Local Election	ns Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election		
Occupation							
Employer							
TOTAL ITEMIZED CONTRIBUTION     (Carry forward to item 3. of next page if addition     (If this is the last page of contributions, this amount	nal pages of this form						

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

NAME OF CANDIDATE OF	R COMMITTEE					ERING THE PERIOD
					FROM:	TO:
3. TOTAL ITEMIZED IN-KIND	CONTRIBUTION	NS FROM	PRECEDING PAGE	(enter \$0 if first itemized page	e) /	Amount
4. COMPLETE THE APPROPRIA	ATE ITEMS FOR EA	CH ITEMI	ZED IN-KIND CONTRIBU	JTION (in-kind contributions totaling	more than \$100 from any c	contributor during the period)
First Name		Middle Na	ame	In-Kind Contribution Receive	ed For.  General Election	Value of In-Kind Contribution
Last Name/Organization Name			marine et A	Runoff (Local Election		
Address				Date of In-Kind Contribution		Aggregate this Election
City	State Zip Code		Description of In-Kind Contribution			
Occupation	Employer					
First Name		Middle Na	ame	In-Kind Contribution Receive	ed For:  General Election	Value of In-Kind Contribution
Last Name/Organization Name	10000			Runoff (Local Election		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer			/		
First Name		Middle Na	ame /	In-Kind Contribution Receive	ed For:	Value of In-Kind Contribution
Last Name/Organization Name				☐ Primary Election ☐ ☐ Runoff (Local Election		
Address				Date of In-Kind Contribution	Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer					
First Name		Middle Na	ame /	In-Kind Contribution Receive	ed For:	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		
Occupation	Employer					
First Name		Middle Nar	me	In-Kind Contribution Receive	ed For:  General Election	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		
Occupation	Employer			1		
TOTAL ITEMIZED IN-KINI     (Carry forward to item 3. of next pa     (If this is the last page of in-kind co	age if additional pages	of this form		v)		
SS 1128 (Pay 2/06)			- Vi Odminidi	D.		

### ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

<ol> <li>NAME OF CANDIDATE OR COMMITTE</li> </ol>		2. REPORT COVERING THE PERIOD			
	1	<u> </u>		FROM:	TO:
3. TOTAL ITEMIZED CAMPAIGN EXPEND	ITURES ER	OM PRECEDING PAG	GE (enter \$0 if first itemized n	ane)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FO					the period)
First Name	Middle N		Purpose of Expenditure	-	Amount of Expenditure
Last Name/Business Name					
Address	10.07	1.2%.	7		
City	State	Zip Code			
First Name	Middle N	lomo	Purpose of Expenditure		Amount of Evpanditure
iist Naille	Middle N	lattie	Purpose of Experialture		Amount of Expenditure
.ast Name/Business Name	1734.19		7 /		
Address	-	And the second	- /		
City	State	Zip Code			
му	State	Zip Code			
First Name	Middle N	lame /	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
Address	100				
Dity	State	Zip Code/			
i di madi					
First Name	Middle N	ame /	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
Address		/	1		
City	State	Zip Code			13 3
First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name	1/				
uddress					
City	State	Zip Code			
nty	State	Zip Code			
First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
ddress			1		
City	State	Zip Code	-		
<ol> <li>TOTAL ITEMIZED EXPENDITURES         (Carry forward to item 3. of next page if additional page (If this is the last page of expenditures, this amount items).     </li> </ol>					
, and a size page of experiences, the amount	soc so siluwii				

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

NAME OF CANDIDATE	OR COMMITTEE					+	2. F		RING THE PERIOD TO:
3. COMPLETE THE APPR	OPRIATE ITEMS	FOR EACH	H ITEMIZE	ED LOAN	(loans totaling m	nore than \$100	from any source of	during the period)	
Complete the Following for the	Source of the Loan							/	
First Name	Middle Na	me		Outstanding (Beginning	Loan Balance of Period)	Loans Receive	d Payri	nents Ou	tstanding Loan Balance (End of Period)
ast Name/Organization Name	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3.4	11 1 1						
ddress			2	Loan Receiv				Date of Loan	
iity	State	Zip Code		☐ Primar	y Election (Local Elections	General Only)	Election		
	List All Endo	orsers or Gua	arantors fo	r Above Loa	n (If more spa	ce is needed	please attach a	a page)	
irst Name		Middle Na	ime		First Name	/		Midd	le Name
ast Name/Organization Name		77.1	7457		Last Name/Org	ganization Nan	ne		
Address		-0.1			Address				
City		State	Zip Co	de	City			State	Zip Code
mount Guaranteed Outstanding		5000			Amount Guara	nteed Outstand	ding		
rirst Name Middle Name			ime	1	/ First Name Middle Name			le Name	
ast Name/Organization Name					Last Name/Org	ganization Nan	ne		
Address				/	Address			21 1	176
Dity		State	Zip Co	de	City			State	Zip Code
mount Guaranteed Outstanding					Amount Guara	nteed Outstand	fing		
irst Name		Middle Na	me/		First Name			Mid	dle Name
ast Name/Organization Name					Last Name/Org	ganization Nan	ne		
ddress					Address				
City		State	Zip Coo	de	City			Stat	e Zip Code
nount Guaranteed Outstanding		/			Amount Guara	nteed Outstand	fing		
rst Name		/ Middle Na	me		First Name			Midd	le Name
st Name/Organization Name		1			Last Name/Org	ganization Nan	ne		
ddress					Address				
City		State	Zip Coo	de	City			State	Zip Code
mount Guaranteed Outstanding	,				Amount Guara	nteed Outstand	ling		
Totals for all Loans (comp (Total loans received should also l					Outstanding Lo		Loans Received	Loan Payments	Outstanding Loan Bala (End of Period)
(Total loan payments should also I Total outstanding loan balance sho	be shown in item 20. or	summary pag	ge.)		, 5			- Gjilonto	(End of Foliod)



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

NAME OF CANDIDATE OR COMMITTEE     Outstanding Balance				2. REPORT COVERING THE PERIOD FROM: TO:				
				FROM:				
OBLIGATION (obligations totaling	COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED BLIGATION (obligations totaling more than \$100 owed to any erson/vendor at the end of the reporting period)			Debt Incurred This Period	Payments This Period	Outstanding Balanc (End of Period)		
First Name	Middle Na	ame						
Last Name/Business Name			-					
Address								
City	State	Zip Code						
Description of Obligation		3.4						
First Name	Middle Na	ame		/				
Last Name/Business Name			-					
Address								
City	State	Zip Code	+ /					
Description of Obligation	2							
First Name	Middle Na	ame						
Last Name/Business Name			7/	144				
Address			7	1				
City	State	Zip Code						
Description of Obligation								
First Name	Middle Na	ame /						
Last Name/Business Name								
Address		/	<del>-</del>					
City	State /	Zip Code				771		
Description of Obligation								
First Name	Mddle Na	ame						
Last Name/Business Name						3		
Address						5 3 1		
City	State	Zip Code						
Description of Obligation								
4. TOTALS		-						
(Total from Outstanding Balance - (Er	nd of Period) column mu	st also be shown						
in item 23b. on summary page.)		1 1 2 1 2 1		10 - 10 - 10 E		and the land of		