## RECEIVED **CAMPAIGN FINANCIAL DISCLOSURE STATEMEN**

**For State and Local Candidates** For Single-Candidate Committees

For	Single-Candidate	e Committe	es <u>F</u>	WILSON COUNTY			
1. DATE OF REPORT	12a. NAME OF CANDIDATE OF MENULU HOLMON COM	mpay in p	1strict 12 com	y Commission			
2.b. IF COMMITTEE, NAME OF CANDIDATE		. 0 .	3. ELECTION DATE	,			
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route WWW.VLES.DWI	d. Lebanan	State	Zip Code 37090	Phone Le15-20-930			
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	t than 4.a.) City	State	Zip Code	Phone			
10,101	fapplicable) 6. NAM M/55///~		REASURER (may be o	andidate)			
7. CATEGORY OR REPORT (Check one)  FIRST SECOND THIRD  QUARTER QUARTER QUARTER	FOURTH PRE- QUARTER PRIMARY	PRE- GENERAL ING DATE OF REPOR	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD	8.D. END	3/31/2	U				
<ul> <li>9. (Check one)</li> <li>a.  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.)</li> <li>b.  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.</li> </ul>							
I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we shenefit of the candidate or for any other non signature of candidate.	ns and expenditures required to swear or affirm that no campaig	o be reported by the in contributions have the federal internal i	candidate committee be been expended for the	y the Campaign			
11. WITNESS SIGNATURE  signature of witness	4/6/11 date	signatu	ure of witness	46/22 date			
12. SUMMARY			<b>،</b> 7\				
a. BALANCE ON HAND LAST REPORT			\$				
b. TOTAL RECEIPTS THIS PERIOD			\$ 1100.09				
c. TOTAL DISBURSEMENTS THIS PERIOD			s 1238.72	461,31			
d. BALANCE ON HAND (12.a. plus 12.b. m	inus 12.c.)		\$	701,31			
e. TOTAL LOANS OUTSTANDING			\$.	<u> </u>			
f. TOTAL OBLIGATIONS OUTSTANDING		•••••	\$	0			



## SUMMARY PAGE - CANDIDATE

WILSON COUNTY

SECTION AND LANGUE AND CONTRACTOR AN							
NAME OF CANDIDATE OR COMMITTEE (In Full)  14. REPORT COVERING THE PERIO  14. REPORT COVERING THE PERIO  14. REPORT COVERING THE PERIO  16. 11/22 TO: 3/3, 12							
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)							
a. Unitemized Contributions (\$100 or less from each source this period)\$							
b. Itemized Contributions (over \$100 from each source this period)\$							
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)\$							
16. LOANS RECEIVED THIS REPORTING PERIOD\$							
17. INTEREST RECEIVED THIS REPORTING PERIOD							
8. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)							
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)							
Flyers printed - Vistaprint \$ 96.44							
\$							
\$							
\$							
\$							
\$							
\$							
\$							
\$							
Ala illy							
Total of Expenditures (\$100 or less each payee)\$							
b. Itemized Expenditures (Over \$100 each payee this period)							
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)							
20. LOAN REPAYMENTS MADE THIS PERIOD							
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)\$							
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. and 22.b.)\$							
23. OBLIGATIONS							
a. Unitemized Obligations Outstanding (\$100 or less each)\$							
o. Itemized Obligations Outstanding (Over \$100 each)\$							
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$							



APR -6 2022

## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

ELECTION COMMISSION

2. REPORT COVERING THE PERIOD Manda Holmes Campaign for District 12 county Commission FROM:///4/20 TO: 3/3/12 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) Amount of Contribution Contribution Received For: Middle Name First Name \$ 1600.00 Last Name/Organization Name Call Primary Election ☐ General Election Runoff (Local Elections Only) Address SD(114) Date of Contribution threen 3/1/21 50Me Have between 3/1/21 4 3/21/22 Aggregate This Election City hur & Appliana Store partner Occupation Employer McCay + Sms Contribution Received For: Amount of Contribution First Name Middle Name \$ 100.00 Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) amder Circle Address Aggregate This Election Date of Contribution City Sometine between 3/16/22 + 3/21/22 Occupation Employer Amount of Contribution Contribution Received For: Middle Name First Name Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Address Aggregate This Election Zip Code Date of Contribution State City Occupation Employer Contribution Received For. Amount of Contribution First Name Middle Name Primary Election General Election Last Name/Organization Name Runoff (Local Elections Only) Address Aggregate This Election Date of Contribution State Zip Code City 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.)

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE  2. REPORT COVERING THE PERIOD  FROM: ////// 170: 3/3//21							
	Amount #0						
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)  4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)							
First Name Designer Graphics Middle Name		Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name  Designer Draphics		1/0/5/MD)	\$1,142.28				
Address 12404 thuy 155 South			mostercard	4111			
City Tyler State Zip Code 103		check #9002 4/16/22/1142,28					
Tyler	171			A			
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					
	ACTUAL.		Durance of Even and it was	Amount of Expanditure			
First Name Middle Name		Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name							
Address							
City	State	Zip Code					
First Nama	Middle Nam	Δ	Purpose of Expenditure	Amount of Expenditure			
First Name Middle Name		Tulpose of Experional	A TOUR OF EXPENDICATE				
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.)							