

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

KM
maid
9:45
RECEIVED
OCT 13 2022

WILSON COUNTY
ELECTION COMMISSION

1. DATE OF REPORT <u>10-9-2022</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Terri Nicholson</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>2022</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>1303 Camelot Bay Mt Juliet TN 37122 6158044059</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>SEC D17</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Terri Nicholson</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>7-26-22</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>9-30-22</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>J Nicholson</u> signature of candidate	<u>10/9/22</u> date
<u>J Nicholson</u> signature of political treasurer	<u>10/9/22</u> date
11. WITNESS SIGNATURE	11. WITNESS SIGNATURE
<u>Brooke Nicholson</u> signature of witness	<u>10/9/22</u> date
<u>Le Ann</u> signature of witness	<u>10/9/22</u> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>687.23</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>24.70</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>505.00</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>206.93</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>



RECEIVED
OCT 13 2022

SUMMARY PAGE - CANDIDATE

WILSON COUNTY
FILED FOR COMMISSION

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Terri Nicholson SEC D17</u>	14. REPORT COVERING THE PERIOD FROM: <u>7/26/22</u> TO: <u>9/30/22</u>
--	---

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 24.70

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.) \$ 24.70

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.) \$ 24.70

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>Gas</u>	\$ <u>55.00</u>
<u>Gift cards - campaign</u>	\$ <u>300.00</u>
<u>Graphics</u>	\$ <u>125.00</u>
<u>Parking</u>	\$ <u>25.00</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ _____

b. Itemized Expenditures (Over \$100 each payee this period) \$ 505.00

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 505.00

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 505.00

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.) \$ _____

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 in item 12.f.) \$ _____

RECEIVED

OCT 13 2022

NICHOLSON COUNTY
ELECTION COMMISSION

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Terri Nicholson SEC D17</i>	2. REPORT COVERING THE PERIOD	
	FROM: <i>7/26</i>	TO: <i>9/30</i>

3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)	Amount <i>24.70</i>
---	------------------------

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 <i>Anedot SV9T</i>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	\$ <i>24.70</i>
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution
Occupation <i>online fundraising</i>			Aggregate This Election
Employer <i>Anedot</i>			

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
Occupation			Aggregate This Election
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
Occupation			Aggregate This Election
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
Occupation			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.)	
--	--

RECEIVED

OCT 13 2022

WILSON COUNTY ELECTION COMMISSION

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD	
	FROM: 7/26	TO: 9/30/2022
	Amount ϕ	

3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)

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	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City		Date of In-Kind Contribution	Aggregate this Election
State	Zip Code	Description of In-Kind Contribution	
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	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City		Date of In-Kind Contribution	Aggregate this Election
State	Zip Code	Description of In-Kind Contribution	
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	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City		Date of In-Kind Contribution	Aggregate this Election
State	Zip Code	Description of In-Kind Contribution	
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	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City		Date of In-Kind Contribution	Aggregate this Election
State	Zip Code	Description of In-Kind Contribution	
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	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City		Date of In-Kind Contribution	Aggregate this Election
State	Zip Code	Description of In-Kind Contribution	
Occupation	Employer		

5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS	Value of In-Kind Contribution
(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.)	



RECEIVED

OCT 13 2022

WILSON COUNTY
CAMPAIGN COMMISSION

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Terri Nicholson			2. REPORT COVERING THE PERIOD FROM: 7/26 TO: 9/30/22	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 505.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name Hermitage	Middle Name	Purpose of Expenditure campaign gift cards		Amount of Expenditure \$ 300.00
Last Name/Business Name Steakhouse				
Address 4342 Lebanon Pike				
City Hermitage	State TN	Zip Code 37076		
First Name Laz	Middle Name	Purpose of Expenditure parking		Amount of Expenditure \$ 25.00
Last Name/Business Name				
Address 198 E Main Parking				
City Franklin	State TN	Zip Code		
First Name Allison	Middle Name	Purpose of Expenditure graphics		Amount of Expenditure \$125.00
Last Name/Business Name Ford				
Address				
City Hermitage	State TN	Zip Code 37076		
First Name Speedway	Middle Name	Purpose of Expenditure gas		Amount of Expenditure \$ 55.00
Last Name/Business Name				
Address 12115 Lebanon Rd				
City mt Juliet	State TN	Zip Code 37122		
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.)				\$ 505.00

RECEIVED

OCT 13 2022

SON COUNTY ELECTION COMMISSION

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD	
	FROM:	TO:

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					
Address		Loan Received For:		Date of Loan	
City		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
State		<input type="checkbox"/> Runoff (Local Elections Only)			
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	City	State
Zip Code		Zip Code	

Amount Guaranteed Outstanding

First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address		Address	
City	State	City	State
Zip Code		Zip Code	

Amount Guaranteed Outstanding

First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address		Address	
City	State	City	State
Zip Code		Zip Code	

Amount Guaranteed Outstanding

First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address		Address	
City	State	City	State
Zip Code		Zip Code	

Amount Guaranteed Outstanding

4. Totals for all Loans (complete on last page of itemized loans)	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
<small>(Total loans received should also be shown in item 16, on summary page.)</small> <small>(Total loan payments should also be shown in item 20, on summary page.)</small> <small>(Total outstanding loan balance should also be shown in item 12.e. on front page.)</small>				



RECEIVED

OCT 13 2022

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

WILSON COUNTY
ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
			FROM:		TO:	
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				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
4. TOTALS						
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)						