

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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For State and Local Candidates For Single-Candidate Committees

JUL - 5 2022

1. DATE OF REPORT <u>07-01-22</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>KRISSA STEPHENS</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>2022</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route <u>530 FIVE OAKS BLVD,</u> City <u>LEBANON, IN</u> State Zip Code <u>37087</u> Phone <u>615-347-6454</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>BOARD - W.S.S.D.</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>ROBERT WAYNE DODD</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>4-24-22</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>6-30-22</u>	
9. (Check one)			
a. <input checked="" 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 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>Krissa Stephens</u> signature of candidate		<u>Robert Wayne Dodd</u> signature of political treasurer	
<u>7/5/22</u> date		<u>7/5/22</u> date	
11. WITNESS SIGNATURE			
<u>Dusie Stephens</u> signature of witness		<u>Dusie Stephens</u> signature of witness	
<u>7/5/22</u> date		<u>7/5/22</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	\$	<u>627.66</u>
b. TOTAL RECEIPTS THIS PERIOD	\$	<u>.13</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$	<u>627.79</u> <u>627.79</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$	<u>0</u>
e. TOTAL LOANS OUTSTANDING	\$	<u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$	<u>0</u>



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SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>KRISSA STEPHENS</u>	14. REPORT COVERING THE PERIOD	
	FROM: <u>4/24/22</u>	<u>WILSON COUNTY</u> <u>ELECTION COMMISSION</u>

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 0

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.) \$ 0

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$.13

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$.13

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)

BOX LUNCHES FOR \$ 98.66

CAMPAIGN VOLUNTEER \$ _____

WORKERS AT FOLLOWING \$ _____

LOCATIONS ON 05/03/22 \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total of Expenditures (\$100 or less each payee) \$ 98.66

b. Itemized Expenditures (Over \$100 each payee this period) \$ 529.13 \$ 627.79

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 627.79

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 627.79

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



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WISCONSIN
ELECTION COMMISSION

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE KRISSA STEPHENS		2. REPORT COVERING THE PERIOD FROM: 07/24-28 TO: 06/30/22	
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 STEVEN	Middle Name	Purpose of Expenditure SURPLUS - CONTRIBUTION REFUND	Amount of Expenditure \$ 264.54
Last Name/Business Name HABEGGER			
Address 13529 CENTRAL PIKE			
City MT. JUBLET	State TN Zip Code 37122		
First Name HEATHER	Middle Name	Purpose of Expenditure SURPLUS - CONTRIBUTION REFUND	Amount of Expenditure \$ 264.59
Last Name/Business Name DOOLEY			
Address 526 FIVE OAKS BLVD			
City LEBANON	State TN Zip Code 37087		
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.)			\$ 529.13

