

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

RECEIVED
JAN 26 2022

WILSON COUNTY
ELECTION COMMISSION

| | |
|--|--|
| 1. DATE OF REPORT 1/15/2022 | 2.a. NAME OF CANDIDATE OR COMMITTEE Debbie Moss |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE | 3. ELECTION DATE 2022 2018 |
| 4.a. CAMPAIGN ADDRESS AND PHONE <div style="display: flex; justify-content: space-between;"> Street or Rural Route 948 Beckwith Road City Mt. Juliet State Tn Zip Code 37122 Phone 615-866-8435 </div> | |
| 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) <div style="display: flex; justify-content: space-between;"> Street or Rural Route City State Zip Code Phone </div> | |
| 5. OFFICE SOUGHT (include district number, if applicable) Circuit Court Clerk | 6. NAME OF POLITICAL TREASURER (may be candidate) Kathy Hughes |
| 7. CATEGORY OR REPORT (Check one) <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER </div> <div> <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input checked="" type="checkbox"/> YEAR-END SUPPLEMENTAL </div> </div> | |
| 8.a. BEGINNING DATE OF REPORTING PERIOD October 19, 2021 | 8.b. ENDING DATE OF REPORTING PERIOD January 15, 2022 |
| 9. (Check one) <p>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.)</p> <p>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.</p> | |
| 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. <div style="display: flex; justify-content: space-between;"> <div> <u>Debbie Moss</u> signature of candidate </div> <div> <u>1/15/22</u> date </div> <div> <u>Kathy Hughes</u> signature of political treasurer </div> <div> <u>1/15/22</u> date </div> </div> | |
| 11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between;"> <div> <u>Donna Carson</u> signature of witness </div> <div> <u>1-26-22</u> date </div> <div> <u>Christine Zugley</u> signature of witness </div> <div> <u>1-26-22</u> date </div> </div> | |
| 12. SUMMARY <div style="display: flex; justify-content: flex-end;"> <div style="text-align: right; margin-right: 20px;">5307.04</div> <div style="text-align: right;">\$</div> </div> <p>a. BALANCE ON HAND LAST REPORT</p> <div style="display: flex; justify-content: flex-end;"> <div style="text-align: right; margin-right: 20px;">1950.00</div> <div style="text-align: right;">\$</div> </div> <p>b. TOTAL RECEIPTS THIS PERIOD</p> <div style="display: flex; justify-content: flex-end;"> <div style="text-align: right; margin-right: 20px;">644.65</div> <div style="text-align: right;">\$</div> </div> <p>c. TOTAL DISBURSEMENTS THIS PERIOD</p> <div style="display: flex; justify-content: flex-end;"> <div style="text-align: right; margin-right: 20px;">6612.39</div> <div style="text-align: right;">\$</div> </div> <p>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)</p> <div style="display: flex; justify-content: flex-end;"> <div style="text-align: right; margin-right: 20px;">8950.00</div> <div style="text-align: right;">\$</div> </div> <p>e. TOTAL LOANS OUTSTANDING</p> <div style="display: flex; justify-content: flex-end;"> <div style="text-align: right; margin-right: 20px;"></div> <div style="text-align: right;">\$</div> </div> <p>f. TOTAL OBLIGATIONS OUTSTANDING</p> | |



WILSON COUNTY
SECTION COMPLETES
COVERING THE RE



JAN 26 2022

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

WILSON COUNTY
ELECTION COMMISSION

| | | | | | |
|--|--------------------|--------------------------|---|--|--|
| 1. NAME OF CANDIDATE OR COMMITTEE Debbie Moss | | | | 2. REPORT COVERING THE PERIOD FROM: 10-19-21 TO: 1-15-22 | |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | | | Amount |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) | | | | | |
| First Name Michael | | Middle Name | | Contribution Received For: | |
| Last Name/Organization Name Collins | | | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| Address 111 Virginia Ave | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City Carthage | State Tn | Zip Code 37030 | Date of Contribution 10-26-21 | | Amount of Contribution 200.00 |
| Occupation | | | | Aggregate This Election | |
| Employer | | | | | |
| First Name Michael | | Middle Name | | Contribution Received For: | |
| Last Name/Organization Name Cox | | | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| Address 1704 Blairmont Drive | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City Lebanon | State Tn | Zip Code 37087 | Date of Contribution 10-22-21 | | Amount of Contribution 250.00 |
| Occupation | | | | Aggregate This Election | |
| Employer | | | | | |
| First Name John | | Middle Name | | Contribution Received For: | |
| Last Name/Organization Name Meadows | | | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| Address 914 Legacy Rd | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City Mt. Juliet | State TN | Zip Code 37122 | Date of Contribution 12-2-21 | | Amount of Contribution 300.00 |
| Occupation | | | | Aggregate This Election | |
| Employer | | | | | |
| First Name Allen | | Middle Name | | Contribution Received For: | |
| Last Name/Organization Name Shehane | | | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| Address 32 Morris Drive | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City Carthage | State Tn | Zip Code 37030 | Date of Contribution 12-7-21 | | Amount of Contribution 1000.00 |
| 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.) | | | | | 1750.00 |



JAN 26 2022

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

 WILLSON COUNTY
ELECTION COMMISSION

| | | | | | |
|--|----------|------------------------------|-------------------------------------|---|--------|
| 1. NAME OF CANDIDATE OR COMMITTEE Debbie Moss | | | | 2. REPORT COVERING THE PERIOD FROM: 10-19-21 TO: 1-15-22 | |
| 3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | | | Amount |
| 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: | |
| Last Name/Organization Name | | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | |
| | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| Address | | Date of In-Kind Contribution | | Value of In-Kind Contribution | |
| City | State | Zip Code | Aggregate this Election | | |
| Occupation | Employer | | Description of In-Kind Contribution | | |
| First Name | | Middle Name | | In-Kind Contribution Received For: | |
| Last Name/Organization Name | | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | |
| | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| Address | | Date of In-Kind Contribution | | Value of In-Kind Contribution | |
| City | State | Zip Code | Aggregate this Election | | |
| Occupation | Employer | | Description of In-Kind Contribution | | |
| First Name | | Middle Name | | In-Kind Contribution Received For: | |
| Last Name/Organization Name | | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | |
| | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| Address | | Date of In-Kind Contribution | | Value of In-Kind Contribution | |
| City | State | Zip Code | Aggregate this Election | | |
| Occupation | Employer | | Description of In-Kind Contribution | | |
| First Name | | Middle Name | | In-Kind Contribution Received For: | |
| Last Name/Organization Name | | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | |
| | | | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| Address | | Date of In-Kind Contribution | | Value of In-Kind Contribution | |
| City | State | Zip Code | Aggregate this Election | | |
| Occupation | Employer | | Description of In-Kind Contribution | | |
| First Name | | Middle Name | | In-Kind Contribution Received For: | |
| Last Name/Organization Name | | | | <input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| | | | | <input checked="" type="checkbox"/> Runoff (Local Elections Only) | |
| Address | | Date of In-Kind Contribution | | Value of In-Kind Contribution | |
| City | State | Zip Code | Aggregate this Election | | |
| Occupation | Employer | | Description of In-Kind Contribution | | |
| 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.) | | | | | |



RECEIVED

JAN 26 2022

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

| | | | |
|--|---|---|-----------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE Debbie Moss | | 2. REPORT COVERING THE PERIOD FROM: 10-19-21 TO: 1-15-22 | |
| 3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | Amount |
| 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 Creative Graphics | | Election Labels | 158.63 |
| Address 100 Oak Street | | | |
| City Lebanon | State Tn Zip Code 37087 | | |
| First Name | Middle Name | Purpose of Expenditure | Amount of Expenditure |
| Last Name/Business Name Image 360 | | Car Magnets | 451.02 |
| Address 218 South Maple | | | |
| 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 | | |
| 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.) | | | 609.65 |



JAN 26 2022

ITEMIZED STATEMENT OF LOANS - CANDIDATE

COUNTY
ELECTION COMMISSION

| | | | | | | | |
|--|--------------------|--------------------------|------|--|-------------------------------|-------------------------------|---|
| 1. NAME OF CANDIDATE OR COMMITTEE Debbie Moss | | | | 2. REPORT COVERING THE PERIOD FROM: 10-19-21 TO: 1-15-22 | | | |
| 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 Debbie | | Middle Name | | Outstanding Loan Balance (Beginning of Period) 8950.00 | Loans Received 0 | Loan Payments 0 | Outstanding Loan Balance (End of Period) 8950.00 |
| Last Name/Organization Name Moss | | | | Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only) | | Date of Loan 8/1/14 | |
| Address 948 Beckwith Rd | | | | | | | |
| City Mt. Juliet | State Tn | Zip Code 37122 | | | | | |
| 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 | City | State |
| 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 | City | State |
| 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 | City | State |
| 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 | City | State |
| 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 | City | State |
| 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) 8950.00 |



JAN 26 2022

WILSON COUNTY
ELECTION COMMISSION

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

| 1. NAME OF CANDIDATE OR COMMITTEE Debbie Moss | | | | 2. REPORT COVERING THE PERIOD | | | |
|--|-------|-------------|--|--|------------------------------|-------------------------|--|
| | | | | FROM: 10-19-21 | | TO: 1-15-22 | |
| 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.) | | | | | | | |

