

CAMPAIGN FINANCIAL DISCLOSURE STATEM ENTR

For State and Local Candidates For Single-Candidate Committees

9 2024

Wilson County Election Commissio

KA 1:40

1. Date: 410 24 2.a. Candidate or Committee Nam	ne: Jessica Hill School Board Cardida
2.b. If Committee, Name of Candidate:	3. Election Date:
4. Campaign Address: 438 Plantation	Bivd.
City: Lebonon State: TN	Zip Code: 57087 Phone: 615-485-8759
5. Candidate Home Address: 438 Planta	
City: Lebonon State: TN	Zip Code: 37087 Phone: 615-485-875
Candidate Email Address: UHIV2727 6	2 yourso, com
6. Office Sought: (include district number, if applicable)	School Board Zone 7
7. Name of Political Treasurer (may be candidate):	elt Jessica Hill
Political Treasurer Email Address:	
8. Category or Report: (check one)	
First Quarter Second Quarter Third Quarter	Fourth Quarter Pre-Primary Pre-General
Mid-Year Supplemental Year-End Supplemental	
9. Reporting Period: Start Date: 2:25-24	End Date: 3 -31-24
10. Detailed Disclosure: (Check one)	
	cause contributions (including in-kind) received total \$1,000
or less AND expenditures total \$1,000 or less for this re	eporting period. (Complete items 12.d., 12.e., and 12.f.)
This campaign is required to file a detailed financial di total more than \$1,000 and/or expenditures total mor	sclosure because contributions (including in-kind) received e than \$1,000 for this reporting period.
by the candidate committee by the Campaign Financia	gn contributions and expenditures required to be reported all Disclosure Act. Additionally, I/we swear or affirm that no personal financial benefit of the candidate or for any other
12. Summary:	4 1
a. Balance On Hand Last Report	\$ \$ \$ 14. · · ·
b. Total Receipts This Period	
c. Total Disbursements This Period	× ~/
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$\$\$
e. Total Loans Outstanding	· A / Y
f. Total Obligations Outstanding	\$\$
SS-1109 (Rev. 1/2023)	Page of

SUMMARY PAGE - CANDIDATE

13. Na	me of Candidate or Committee: Jessica Hill School Board Chinaldate
14 Rei	porting Period: Start Date: 2-25-24 End Date: 4-16-24
15. Red	
15. Net	Unitemized Contributions (\$100 or less from each source this period)
a.	(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See <i>Instructions</i> for more information.)
b.	Itemized Contributions (over \$100 from each source this period)\$
c.	Loans Received This Reporting Period\$
d.	Interest Received This Reporting Period\$
e.	Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.)\$
16. Dis	bursements:
a.	Total Expenditures (other than loan payments)
b.	Loan Repayments Made This Period\$
c.	Total Obligation Payments Made This Period\$
d.	Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)\$
17. ln-l	Kind Contributions:
a.	Unitemized In-Kind Contributions Received This Period \$\$
b.	Itemized In-Kind Contributions Received This Period\$
c.	Total In-Kind Contributions Received This Period\$
18. Ob	ligations:
а	Total Obligations Outstanding (must be shown in item 12.f.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jessica Hill School Board Candidate
2. Reporting Period: Start Date: 2-25-34 End Date: 4-10-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$
COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an inkind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) al ong with the candidate's name in the purpose of the expenditure section.
Business or Organization Name: Wilson Bank & Trust OR
First Name: Middle Name: Last Name:
Address: 623 Mest Main & City: Lebanon State: TD Zip Code: 37087
Purpose of Expenditure: Account Service fee
Amount of Expenditure: \$ 10 69 Date of Expenditure: \$ 2 29 24
Wiles Quy Trust
Business or Organization Name: Wilson Bank & Trust OR
First Name: Middle Name: Last Name:
Address: 623 West Main St. City: Lebranon State: TN Zip Code: 37087
Purpose of Expenditure: Account Service Fee
Amount of Expenditure: \$ 3 29 24
Business or Organization Name: Campaign Partners or
First Name: Middle Name: Last Name:
Address: 118 Still Biver Rd. City: Harrow State: MA Zip Code: 01451
Purpose of Expenditure: Final month of Website
Amount of Expenditure: \$ 29.00 Date of Expenditure: \$ 3 \(\oldo \
Amount of Expenditure: \$ Date of Expenditure: \$
Business or Organization Name: Snow White OR
First Name: Middle Name: Last Name:
Address: 1714 West Main St. City: Lebanon State: TN Zip Code: 37087
Purpose of Expenditure: Lunch for Sign holders
Amount of Expenditure: \$ 3 22.21 Date of Expenditure: \$ 3 5 124
Analy 11 Ana 2
Business or Organization Name: OR
First Name: hemeth Middle Name: Last Name: Nelson Jr.
Address: 801 Horn Springs Na City: Leocurbo State: TN Zip Code: 31001
Purpose of Expenditure: Clare back white back with the back white back with the back white back with the ba
Amount of Expenditure: \$ 8743.2 Date of Expenditure: \$ 4924
Total Expenditures: \$ \$814.41 Final
(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this
amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name	Jessica Hill School	n 6. 0. 1.	1.1.1	
2. Reporting Period: Start Date:	2 25 24 End Date: 3	DI POCOVOI (10	andidate	
3. Complete the appropriate item	ns for each loan totaling more than	31/24		
Complete the following for the	is to cach loan totaling more than	one hundred dolla	ars (\$100).	
Business or Organization Name	of each loan received and/or outstanding	during the period.		
First Name: TOSSICO			A 1	
Address: 430 Plana	Middle Name: Mation Blogity: Lebane Ling)	Last Name	H1)	
Outstanding Loan Palar - (D.	idia Diverty: Cloans	State:_	N Zip Code: 3	1087
and a suit balance (beginn	1119)\$ 1 1 0 0			
Loan Payments	\$ \$	60		
Outstanding Lagrage	\$ 100	1		
Loan Bassing Loan (End)	s \$ Ø			
Data of Law O	Election General Election	Runoff (Local Ele	ections Only)	
Date of Loan: Paid 100Y	Book on 2/29/	24	,	
List all endorsers or guarantors for above	e loan (If more space is needed, places	Analis I Day		
business of Organization Name:				
First Name:	Middle Name:	Last Name		0
Address:	City:	Last Name	2:	
Amount Guaranteed Outstanding: \$		State:	Zip Code:	
Business or Organization Name: First Name:				
	Wilddie Name	1		
	City:	Stato	Zin Code:	
Amount Guaranteed Outstanding: \$_				
Business or Organization Name:				
Business or Organization Name:	Middle News			OR
First Name:Address:	Wilddie Name:	Last Name	e:	
Amount Guaranteed Outstanding: \$_	City;	Stato.	_ Zip Code:	
Business or Organization Name: First Name:				
	IVIIQQIE Name·	4		
	CITV:	C+-+-		
Amount Guaranteed Outstanding: \$		State:	Zip Code:	
Totals for all loans (Complete this page for Total loans received and loan payments should Balance (Regionals)	or each outstanding loan during the period.	Complete this section of	only on last page of loa	ns.
Balance (Beginning)	page, outstanding	Ioan balance should be	shown on front page.)	
Loans Received	S A B			
Loan Payments	NIGO			
Outstanding Loan (End)		٠, , , , ١		
SS-1132 (Rev. 1/2023)	3_ 44	_final		
(11011 112023)			Page of	