

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 1/25/2023		2.a. NAME OF CANDIDATE OR COMMITTEE Karen Johnson													
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE 2022-08-04													
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone P.O. Box 17131 Nashville TN 37217															
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone 2928 Moss Spring Dr Nashville TN 37013															
5. OFFICE SOUGHT (include district number, if applicable) Register of Deeds		6. NAME OF POLITICAL TREASURER (may be candidate) Charles Welch													
7. CATEGORY OR REPORT (Check one) ☐ FIRST QUARTER ☐ SECOND QUARTER ☐ THIRD QUARTER ☒ FOURTH QUARTER ☐ PRE-PRIMARY ☐ PRE-GENERAL ☐ MID-YEAR SUPPLEMENTAL ☐ YEAR-END SUPPLEMENTAL															
8.a. BEGINNING DATE OF REPORTING PERIOD 2022-10-01		8.b. ENDING DATE OF REPORTING PERIOD 2023-01-15													
9. (Check one) 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.) 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.															
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. signature of candidate 97B1-4277-9D27-714 01/25/23 - 5:09 AM signature of political treasurer date															
11. WITNESS SIGNATURE signature of witness date signature of witness date															
12. SUMMARY <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. BALANCE ON HAND LAST REPORT</td> <td style="width: 20%; text-align: right;">\$2,693.76</td> </tr> <tr> <td>b. TOTAL RECEIPTS THIS PERIOD</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td>c. TOTAL DISBURSEMENTS THIS PERIOD</td> <td style="text-align: right;">\$1,626.59</td> </tr> <tr> <td>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)</td> <td style="text-align: right;">\$1,067.17</td> </tr> <tr> <td>e. TOTAL LOANS OUTSTANDING</td> <td style="text-align: right;">\$15,200.00</td> </tr> <tr> <td>f. TOTAL OBLIGATIONS OUTSTANDING</td> <td style="text-align: right;">\$0.00</td> </tr> </table>				a. BALANCE ON HAND LAST REPORT	\$2,693.76	b. TOTAL RECEIPTS THIS PERIOD	\$0.00	c. TOTAL DISBURSEMENTS THIS PERIOD	\$1,626.59	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$1,067.17	e. TOTAL LOANS OUTSTANDING	\$15,200.00	f. TOTAL OBLIGATIONS OUTSTANDING	\$0.00
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d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$1,067.17														
e. TOTAL LOANS OUTSTANDING	\$15,200.00														
f. TOTAL OBLIGATIONS OUTSTANDING	\$0.00														



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Karen Johnson	14. REPORT COVERING THE PERIOD FROM: 2022-10-01 TO: 2023-01-15
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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 \$ _____

18. 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)

Donation	\$	\$100.00
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____

Total of Expenditures (\$100 or less each payee) \$ 100.00

b. Itemized Expenditures (Over \$100 each payee this period) \$ 1,526.59

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 1,626.59

20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 1,626.59

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) \$ _____

b. Itemized Obligations Outstanding (Over \$100 each) \$ _____

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ _____



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Karen Johnson			2. REPORT COVERING THE PERIOD FROM: 2022-10-01 TO: 2023-01-15	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$0.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name Karen	Middle Name	Purpose of Expenditure Reimbursement	Amount of Expenditure \$420.00	
Last Name/Business Name Johnson				
Address PO Box 17131				
City Nashville	State TN	Zip Code 37217		
First Name	Middle Name	Purpose of Expenditure Banner (In-Kind Contribution for Justin Jones for State Rep.)	Amount of Expenditure \$206.59	
Last Name/Business Name Fed Ex Office				
Address 540 Donelson Pike				
City Nashville	State TN	Zip Code 37214		
First Name	Middle Name	Purpose of Expenditure Ad	Amount of Expenditure \$150.00	
Last Name/Business Name 2nd Chances				
Address 209 10th Ave S #300				
City Nashville	State TN	Zip Code 37203		
First Name	Middle Name	Purpose of Expenditure Donation	Amount of Expenditure \$500.00	
Last Name/Business Name Charlane Oliver for Senate				
Address P.O. Box 330602				
City Nashville	State TN	Zip Code 37203		
First Name	Middle Name	Purpose of Expenditure Donation	Amount of Expenditure \$250.00	
Last Name/Business Name Fuerza Democrats				
Address 319 Plus Park Blvd				
City Nashville	State TN	Zip Code 37217		
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.)				\$1,526.59



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE						2. REPORT COVERING THE PERIOD				
Karen Johnson						FROM: 2022-10-01		TO: 2023-01-15		
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 Karen			Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name Johnson					\$15,200.00		\$0.00	\$0.00	\$15,200.00	
Address 2928 Moss Spring Dr					Loan Received For:			Date of Loan		
City Antioch					☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)			2021-10-05		
State TN					Zip Code 37013					
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	
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	
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	
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	
Amount Guaranteed Outstanding					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)	
(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.)					\$15,200.00		\$0.00	\$0.00	\$15,200.00	

