

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

John Rose for Tennessee

ADDRESS (number and street)

PO Box 2404



Check if different than previously reported. (ACC)

Cookeville

TN

38502

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00652743

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

TN

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
11 / 08 / 2022

in the State of

TN

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2022

through

M M / D D / Y Y Y Y
10 / 19 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Baker, Phillip, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Baker, Phillip, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 27 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 39

Write or Type Committee Name

John Rose for Tennessee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	2	2

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	26841.23	1435358.72
(b) Total Contribution Refunds (from Line 20(d))	0.00	2930.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	26841.23	1432428.72
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	29108.50	597728.69
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	29108.50	597728.69
8. Cash on Hand at Close of Reporting Period (from Line 27)	1309200.54	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1987269.26	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

John Rose for Tennessee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	2	2

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

7419.75

1064269.25

(ii) Unitemized.....

2921.48

62389.47

(iii) TOTAL of contributions from individuals ▶

10341.23

1126658.72

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

16500.00

308700.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

26841.23

1435358.72

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

39585.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

250000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

250000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

26841.23

1724943.72

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 39

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	29108.50	597728.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	500000.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	500000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	430.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2930.00
21. OTHER DISBURSEMENTS	12000.00	30700.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	41108.50	1131358.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1323467.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	26841.23
25. SUBTOTAL (add Line 23 and Line 24).....	1350309.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41108.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1309200.54

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 39

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

CABE, JIM, , ,

A.

Mailing Address 3206 COLLIER GATE COURT

City

SMYRNA

State

GA

Zip Code

30080-4401

FEC ID number of contributing
federal political committee.

C

Name of Employer

TURNKEY ATM SOLUTIONS

Occupation

PRESIDENT

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		17		2022

Transaction ID : SA11A.9323

Amount of Each Receipt this Period

300.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

FITZPATRICK, WALTER, S., , III

B.

Mailing Address 809 OAKLAWN COURT

City

COOKEVILLE

State

TN

Zip Code

38501-2921

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		17		2022

Transaction ID : SA11A.9322

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

HUNTER, WILLIAM, , ,

C.

Mailing Address 205 LEI LANI DRIVE

City

LEBANON

State

TN

Zip Code

37087-3003

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		15		2022

Transaction ID : SA11A.9270

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

825.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
John Rose for Tennessee

A. Full Name (Last, First, Middle Initial)
LEAMAN, RANDALL, , ,

Mailing Address 48 NORTH BROAD STREET
UNIT 205

City LITITZ State PA Zip Code 17543-1050

FEC ID number of contributing federal political committee. C

Name of Employer PARAMOUNT MANAGEMENT GROUP LLC Occupation PRESIDENT

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 17 2022

Transaction ID : SA11A.9321

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. C C00694323

Name of Employer Occupation

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
110538.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 07 2022

Transaction ID : SA11C.8096

Amount of Each Receipt this Period

2135.79

☒ Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

C. Full Name (Last, First, Middle Initial)
BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City STAUNTON State VA Zip Code 24401-6287

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation HORSE BOARDING

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 05 2022

Transaction ID : SA11A.8108

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

520.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

BONIN, JUDY, , ,

A.

Mailing Address 187 EDGEFIELD LANE

City

STAUNTON

State

VA

Zip Code

24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

HORSE BOARDING

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2022			

Transaction ID : SA11A.8109

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MCCANN, WILLIAM, , ,

B.

Mailing Address 12909 E CASTRO ST

City

DEWEY

State

AZ

Zip Code

86327-8285

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

289.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2022			

Transaction ID : SA11A.8157

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MCCANN, WILLIAM, , ,

C.

Mailing Address 12909 E CASTRO ST

City

DEWEY

State

AZ

Zip Code

86327-8285

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

289.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2022			

Transaction ID : SA11A.8158

Amount of Each Receipt this Period

24.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

69.75

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
John Rose for Tennessee

A. Full Name (Last, First, Middle Initial)
MINATRA, JAMES, , ,

Mailing Address 1003 MILL ST.

City PULASKI	State TN	Zip Code 38478-4630
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer STRHS	Occupation SURGICAL TECHNOLOGIST
---------------------------	-------------------------------------

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 267.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 04 / 2022

Transaction ID : SA11A.8162

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 110538.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2022

Transaction ID : SA11C.9211

Amount of Each Receipt this Period

6371.18

☒ Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

C. Full Name (Last, First, Middle Initial)
BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City STAUNTON	State VA	Zip Code 24401-6287
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation HORSE BOARDING
-----------------------------------	------------------------------

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2022

Transaction ID : SA11A.9221

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

120.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

BONIN, JUDY, , ,

A.

Mailing Address 187 EDGEFIELD LANE

City
STAUNTONState
VAZip Code
24401-6287FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
HORSE BOARDING

Receipt For: 2022

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2022			

Transaction ID : SA11A.9230

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

PARGH, BERNARD, , ,

B.

Mailing Address 4419 HERBERT PLACE

City
NASHVILLEState
TNZip Code
37215-4529FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
INVESTOR

Receipt For: 2022

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

5800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2022			

Transaction ID : SA11A.9212

Amount of Each Receipt this Period

5800.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED; SEE REATTRIBUTION

Full Name (Last, First, Middle Initial)

PARGH, MARIA, , ,

C.

Mailing Address 4419 HERBERT PLACE

City
NASHVILLEState
TNZip Code
37215-4529FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2022

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

5800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2022			

Transaction ID : SA11A.9268

Amount of Each Receipt this Period

2900.00

☒ Memo Item
CONTRIBUTION

REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional)..... ▶

5810.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 39

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
John Rose for Tennessee

A. Full Name (Last, First, Middle Initial)
PARGH, BERNARD, , ,

Mailing Address 4419 HERBERT PLACE

City NASHVILLE	State TN	Zip Code 37215-4529
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation INVESTOR
-----------------------------------	------------------------

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 11 / 2022

Transaction ID : SA11A.9269

Amount of Each Receipt this Period

- 2900.00

☒ Memo Item
CONTRIBUTION

REATTRIBUTION TO SPOUSE

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
110538.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2022

Transaction ID : SA11C.9273

Amount of Each Receipt this Period

523.26

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

C. Full Name (Last, First, Middle Initial)
BONIN, JUDY, , ,

Mailing Address 187 EDGEFIELD LANE

City STAUNTON	State VA	Zip Code 24401-6287
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation HORSE BOARDING
-----------------------------------	------------------------------

Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2022

Transaction ID : SA11A.9282

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

20.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

BONIN, JUDY, , ,

A.

Mailing Address 187 EDGEFIELD LANE

City

STAUNTON

State

VA

Zip Code

24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

HORSE BOARDING

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 17 2022

Transaction ID : SA11A.9283

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BONIN, JUDY, , ,

B.

Mailing Address 187 EDGEFIELD LANE

City

STAUNTON

State

VA

Zip Code

24401-6287

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

HORSE BOARDING

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 16 2022

Transaction ID : SA11A.9284

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SMITH, LESLIE, , ,

C.

Mailing Address 129 LIMBI DR

City

FOLSOM

State

CA

Zip Code

95630-3271

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 15 2022

Transaction ID : SA11A.9306

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

55.00

7419.75

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☒ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. AUTOMOTIVE FREE INTERNATIONAL TRADE PACMailing Address 1625 PRINCE STREET
SUITE 225

City

ALEXANDRIA

State

VA

Zip Code

22314-2889

FEC ID number of contributing
federal political committee.

C

C00250399

Name of Employer

Occupation

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2022			

Transaction ID : SA11C.9317

Amount of Each Receipt this Period

2500.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. LENDMARK FINANCIAL SERVICES, LLC. LENDPAC (A.K.A. 'LENDPAC')Mailing Address 1735 N. BROWN ROAD
SUITE 300

City

LAWRENCEVILLE

State

GA

Zip Code

30043-8228

FEC ID number of contributing
federal political committee.

C

C00580225

Name of Employer

Occupation

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2022			

Transaction ID : SA11C.7098

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City

CHICAGO

State

IL

Zip Code

60611-4011

FEC ID number of contributing
federal political committee.

C

C00030718

Name of Employer

Occupation

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2022			

Transaction ID : SA11C.8211

Amount of Each Receipt this Period

5000.00

☐ Memo Item
 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶

8500.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 11a	☐ 11b	☒ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPACMailing Address 66 CANAL CENTER PLAZA
SUITE 300

City

ALEXANDRIA

State

VA

Zip Code

22314-1576

FEC ID number of contributing
federal political committee.**C** C00089458

Name of Employer

Occupation

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2022			

Transaction ID : SA11C.9320

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION
B. ROCK HOLDINGS INC. PAC

Full Name (Last, First, Middle Initial)

Mailing Address 101 S. WASHINGTON SQ.
SUITE 300

City

LANSING

State

MI

Zip Code

48933-1732

FEC ID number of contributing
federal political committee.**C** C00388827

Name of Employer

Occupation

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2022			

Transaction ID : SA11C.9319

Amount of Each Receipt this Period

2000.00

☐ Memo Item
 CONTRIBUTION
C. UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)

Full Name (Last, First, Middle Initial)

Mailing Address 600 WASHINGTON BOULEVARD
C/O PER DYRVIK

City

STAMFORD

State

CT

Zip Code

06901-3726

FEC ID number of contributing
federal political committee.**C** C00012245

Name of Employer

Occupation

Receipt For: 2022

☐ Primary
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2022			

Transaction ID : SA11C.9318

Amount of Each Receipt this Period

5000.00

☐ Memo Item
 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶

8000.00

TOTAL This Period (last page this line number only)..... ▶

16500.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. ROSE, JOHN, W., ,

Mailing Address PO BOX 2404

City
COOKEVILLEState
TNZip Code
38502Purpose of Disbursement
TRAVEL/FOOD/BEVERAGE/SUPPLIES FOR REIMBURSEMENT

001

Candidate Name

ROSE, JOHN, W., ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: TN

District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		18		2022

FEC Identification Number

C H8TN06094

Amount of Each Disbursement this Period

11855.80

Transaction ID : SB17.I6450

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROSE, JOHN, W., ,

Mailing Address PO BOX 2404

City
COOKEVILLEState
TNZip Code
38502Purpose of Disbursement
MILEAGE REIMBURSEMENT

002

Candidate Name

ROSE, JOHN, W., ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: TN

District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		17		2022

FEC Identification Number

C H8TN06094

Amount of Each Disbursement this Period

327.12

Transaction ID : SB17.I6463

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address P.O. BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
AIRFARE

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

238.60

Transaction ID : SB17.I6478

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11855.80

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address P.O. BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
AIRFARE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

238.60

Transaction ID : SB17.I6479

☒ Memo Item**B. AMERICAN AIRLINES**

Mailing Address P.O. BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
AIRFARE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

238.60

Transaction ID : SB17.I6485

☒ Memo Item**C. AMERICAN AIRLINES**

Mailing Address P.O. BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
AIRFARE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

238.60

Transaction ID : SB17.I6486

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. BLUEWATERS EQUIPMENT RENTAL

Mailing Address 475 FOUTCH DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2022

City
COOKEVILLEState
TNZip Code
38501Purpose of Disbursement
EVENT RENTALS

007

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

3090.76

Transaction ID : SB17.I6483

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. COURTYARD BY MARRIOTT

Mailing Address 75 JEFFERSON AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		17		2022

City
MEMPHISState
TNZip Code
38103Purpose of Disbursement
HOTEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

231.23

Transaction ID : SB17.I6461

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. COURTYARD BY MARRIOTT

Mailing Address 75 JEFFERSON AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		17		2022

City
MEMPHISState
TNZip Code
38103Purpose of Disbursement
HOTEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

221.35

Transaction ID : SB17.I6462

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. CUSTOMINKMailing Address 2910 DISTRICT AVENUE
#300City
FAIRFAXState
VAZip Code
22031Purpose of Disbursement
T-SHIRTS

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

1492.49

Transaction ID : SB17.I6475

☒ Memo Item**B. DOLLAR CAR RENTAL**

Mailing Address 5310 EAST 31ST STREET

City
TULSAState
OKZip Code
74135Purpose of Disbursement
TOLL FEE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

89.00

Transaction ID : SB17.I6459

☒ Memo Item**C. DOLLAR CAR RENTAL**

Mailing Address 5310 EAST 31ST STREET

City
TULSAState
OKZip Code
74135Purpose of Disbursement
TOLL FEE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

29.00

Transaction ID : SB17.I6460

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. HILTON

Mailing Address 501 WEST CHURCH AVENUE

City
KNOXVILLEState
TNZip Code
37902Purpose of Disbursement
HOTEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

151.01

Transaction ID : SB17.I6468

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. HILTON

Mailing Address 501 WEST CHURCH AVENUE

City
KNOXVILLEState
TNZip Code
37902Purpose of Disbursement
HOTEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

119.60

Transaction ID : SB17.I6469

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HILTON GARDEN INN

Mailing Address 305 KOREAN VETERANS BOULEVARD

City
NASHVILLEState
TNZip Code
37203Purpose of Disbursement
HOTEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

373.59

Transaction ID : SB17.I6457

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. HOBBY LOBBY

Mailing Address 377 WEST JACKSON STREET

City
COOKEVILLEState
TNZip Code
38501Purpose of Disbursement
EVENT SUPPLIES

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

403.73

Transaction ID : SB17.I6473

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. HOBBY LOBBY

Mailing Address 377 WEST JACKSON STREET

City
COOKEVILLEState
TNZip Code
38501Purpose of Disbursement
EVENT SUPPLIES

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

26.31

Transaction ID : SB17.I6481

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HOBBY LOBBY

Mailing Address 377 WEST JACKSON STREET

City
COOKEVILLEState
TNZip Code
38501Purpose of Disbursement
REFUND OF EVENT SUPPLIES

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

- 37.61

Transaction ID : SB17.I6482

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN

Mailing Address 1091 SOUTH WILLOW AVENUE

Date of Disbursement

M M	D D	Y Y Y Y
08	24	2022

City
COOKEVILLEState
TNZip Code
38501Purpose of Disbursement
HOTEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

253.88

Transaction ID : SB17.I6466

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. HOLIDAY INN

Mailing Address 1091 SOUTH WILLOW AVENUE

Date of Disbursement

M M	D D	Y Y Y Y
08	26	2022

City
COOKEVILLEState
TNZip Code
38501Purpose of Disbursement
HOTEL

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

144.76

Transaction ID : SB17.I6472

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. NASHVILLE INTERNATIONAL AIRPORT

Mailing Address 1 TERMINAL DRIVE

Date of Disbursement

M M	D D	Y Y Y Y
07	10	2022

City
NASHVILLEState
TNZip Code
37214Purpose of Disbursement
PARKING

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

78.00

Transaction ID : SB17.I6451

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. SAM'S CLUB

Mailing Address 1177 SAMS STREET

City
COOKEVILLEState
TNZip Code
38506Purpose of Disbursement
EVENT SUPPLIES

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	26	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

734.05

Transaction ID : SB17.I6474

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SEMINOLE HARD ROCK HOTEL

Mailing Address 1 SEMINOLE WAY

City
DAVIEState
FLZip Code
33314Purpose of Disbursement
HOTEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	14	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

262.47

Transaction ID : SB17.I6488

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SEMINOLE HARD ROCK HOTEL

Mailing Address 1 SEMINOLE WAY

City
DAVIEState
FLZip Code
33314Purpose of Disbursement
HOTEL

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	14	2022

FEC Identification Number

C

Amount of Each Disbursement this Period

262.47

Transaction ID : SB17.I6489

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
AIRFARE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

202.98

Transaction ID : SB17.I6455

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
AIRFARE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

244.98

Transaction ID : SB17.I6456

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
AIRFARE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

82.60

Transaction ID : SB17.I6464

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
AIRFARE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

119.60

Transaction ID : SB17.I6465

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
AIRFARE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

135.60

Transaction ID : SB17.I6491

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
AIRFARE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		16		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

135.60

Transaction ID : SB17.I6492

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. SOUTHWINDS RENTALS

Mailing Address N MT. JULIET ROAD

City
MT. JULIETState
TNZip Code
37122Purpose of Disbursement
EVENT EQUIPMENT RENTAL

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

511.80

Transaction ID : SB17.I6471

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THE CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

47.45

Transaction ID : SB17.I6454

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THE CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	2

FEC Identification Number

C

Amount of Each Disbursement this Period

46.80

Transaction ID : SB17.I6493

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. VANNGO PORTABLE SOLUTIONS

Mailing Address 6817 LEBANON ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		07		2022

City
MURFREESBOROState
TNZip Code
37129Purpose of Disbursement
EVENT RENTALS

007

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

607.33

Transaction ID : SB17.I6477

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS ST
SUITE 1770

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		19		2022

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
MERCHANT ACCOUNT FEES

001

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2.20

Transaction ID : SB17.I6494

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. CMDIMailing Address 1593 SPRING HILL ROAD
STE. 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2022

City
VIENNAState
VAZip Code
22182Purpose of Disbursement
SUBSCRIPTIONS

001

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1200.00

Transaction ID : SB17.I6448

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

1202.20

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. FIRST FREEDOM BANK

Mailing Address 1620 W. MAIN ST.

City
LEBANONState
TNZip Code
37087Purpose of Disbursement
BANK FEE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

6518.70

Transaction ID : SB17.I5442

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. H2 CAPITAL CONSULTING LLC

Mailing Address 5072 SHERIER PLACE NORTHWEST

City
WASHINGTONState
DCZip Code
20016Purpose of Disbursement
FINANCE CONSULTING

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.I5443

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LES WILLIAMSON LLC

Mailing Address P.O. BOX 60148

City
WASHINGTONState
DCZip Code
20039Purpose of Disbursement
BANK FEE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.I5444

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11518.70

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. STAR NEWS DIGITAL MEDIA

Mailing Address 3000 IROQUOIS DRIVE

City
THOMPSON'S STATIONState
TNZip Code
37179Purpose of Disbursement
DIGITAL/RADIO ADS

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.I5447

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
PROCESSING FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2022

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

83.79

Transaction ID : SB17.I5446

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
PROCESSING FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2022

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

94.07

Transaction ID : SB17.I6447

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4177.86

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
PROCESSING FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		18		2022

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

253.94

Transaction ID : SB17.I6449

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

253.94

TOTAL This Period (last page this line number only).....▶

29008.50

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (In Full)

John Rose for Tennessee

Full Name (Last, First, Middle Initial)

A. TENNESSEE FFA FOUNDATION, INC.

Mailing Address P OBOX 5034

City
COOKEVILLEState
TNZip Code
38505Purpose of Disbursement
DONATION

012

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2022

FEC Identification Number

C

Amount of Each Disbursement this Period

12000.00

Transaction ID : SB21.I5445

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

12000.00

TOTAL This Period (last page this line number only).....▶

12000.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 30 OF 39

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1238

John Rose for Tennessee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

ROSE, JOHN, W., ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
P.O. BOX 2404

City

COOKEVILLE

State

TN

ZIP Code

38502

☒ Personal Funds of the Candidate

Original Amount of Loan

150000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

150000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^M/ D 31^D

/ Y 2017 Y

M M

/ D D

/ On Demand^Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

150000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 31 OF 39

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1239

John Rose for Tennessee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

ROSE, JOHN, W., ,

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
P.O. BOX 2404

City

COOKEVILLE

State

TN

ZIP Code

38502

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 12^M/ D 31^D

/ Y 2017 Y

M M

/ D D

/ On Demand^Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 32 OF 39

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1248

John Rose for Tennessee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

ROSE, JOHN, W., ,

Election: 2018

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
P.O. BOX 2404

City

COOKEVILLE

State

TN

ZIP Code

38502

☒ Personal Funds of the Candidate

Original Amount of Loan

250000.00

Cumulative Payment To Date

4450.00

Balance Outstanding at Close of This Period

245550.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 11 M

/ D 06 D

/ Y 2018 Y

M M

/ D D

/ On Demand Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

245550.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 33 OF 39

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1251

John Rose for Tennessee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

ROSE, JOHN, W., ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
P.O. BOX 2404

City

State

ZIP Code

COOKEVILLE

TN

38502

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

30000.00

0.00

30000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^M/ D 29^D

/ Y 2018 Y

M M

/ D D

/ On Demand^Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

30000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 34 OF 39

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1253

John Rose for Tennessee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

ROSE, JOHN, W., ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
P.O. BOX 2404

City

State

ZIP Code

COOKEVILLE

TN

38502

☒ Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

20000.00

0.00

20000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 22 D

Y 2019 Y

M M

D D

On Demand

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

20000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 35 OF 39

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1262

John Rose for Tennessee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

ROSE, JOHN, W., ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
P.O. BOX 2404

City

COOKEVILLE

State

TN

ZIP Code

38502

☒ Personal Funds of the Candidate

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 08 M

/ D 05 D

/ Y 2020 Y

M M

/ D D

/ On Demand Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 36 OF 39

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1264

John Rose for Tennessee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

ROSE, JOHN, W., ,

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
P.O. BOX 2404

City

COOKEVILLE

State

TN

ZIP Code

38502

☒ Personal Funds of the Candidate

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 11 M

/ D 02 D

/ Y 2020 Y

M M

/ D D

/ On Demand Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

250000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 37 OF 39

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.3357

John Rose for Tennessee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

ROSE, JOHN, W., ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 2404

City

COOKEVILLE

State

TN

ZIP Code

38502

☒ Personal Funds of the Candidate

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 08 M

/ D 02 D

/ Y 2022 Y

M M

/ D D

/ On Demand Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

250000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 38 OF 39

FOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1244

John Rose for Tennessee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

FIRST FREEDOM BANK

Election: 2018

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
1620 W. MAIN ST.

City

LEBANON

State

TN

ZIP Code

37087

☐ Personal Funds of the Candidate

Original Amount of Loan

1750000.00

Cumulative Payment To Date

1009945.00

Balance Outstanding at Close of This Period

740055.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 10 M /

D 05 D /

Y 2018 Y

M 10 M /

D 05 D /

Y 2021 Y

355.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

740055.00

TOTALS This Period (last page in this line only).....▶

1985605.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 39 OF 39

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

John Rose for Tennessee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ROSE, JOHN, W., ,

Nature of Debt (Purpose):

Food/Beverage

Mailing Address PO BOX 2404

City

COOKEVILLE

State

TN

Zip Code

38502

Outstanding Balance Beginning This Period

11855.80

Transaction ID : SD10.1

Amount Incurred This Period

1664.26

Payment This Period

11855.80

Outstanding Balance at Close of This Period

1664.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

1664.26

2) **TOTALS** This Period (last page this line number only)

1664.26

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

1985605.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

1987269.26