

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Paul Kaiser				2. REPORT COVERING THE PERIOD	
				FROM: 10/30/22	TO: 01/25/23
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 Cliff	Middle Name	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name Messer		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		100.00	
Address 13313 Union Ave Ste 1000		<input type="checkbox"/> Runoff (Local Elections Only)			
City Memphis	State TN	Zip Code 38104	Date of Contribution 11/01/2022		Aggregate This Election 100.00
Occupation Consultant		Employer Abacus Strategies			
First Name	Middle Name	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address		<input type="checkbox"/> Runoff (Local Elections Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation		Employer			
First Name	Middle Name	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address		<input type="checkbox"/> Runoff (Local Elections Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation		Employer			
First Name	Middle Name	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Address		<input type="checkbox"/> Runoff (Local Elections Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation		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.)					100.00



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Paul Kaiser				2. REPORT COVERING THE PERIOD	
				FROM: 10/30/22	TO: 01/25/23
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 type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
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.)					

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Paul Kaiser				2. REPORT COVERING THE PERIOD			
				FROM: 10/30/22		TO: 01/25/23	
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		Advertising		175.00	
Last Name/Business Name Meta							
Address 1 Hacker Way							
City Menlo Park		State CA	Zip Code 94025				
First Name		Middle Name		Mailers and postage		1,045.58	
Last Name/Business Name Abacus Strategies							
Address 1331 Union Ave Ste 1000							
City Memphis		State TN	Zip Code 38104				
First Name		Middle Name		Signs		104.72	
Last Name/Business Name Lowe's							
Address 8300 Hwy 64							
City Bartlett		State TN	Zip Code 38133				
First Name		Middle Name		Food and supplies		430.99	
Last Name/Business Name Costco							
Address 2431 N Germantown Pkwy							
City Cordova		State TN	Zip Code 38016				
First Name		Middle Name		Food		161.42	
Last Name/Business Name Honeybaked Ham							
Address 6010 Stage Rd							
City Bartlett		State TN	Zip Code 38134				
First Name		Middle Name		Advertising		151.05	
Last Name/Business Name Meta							
Address 1 Hacker Way							
City Menlo Park		State CA	Zip Code 94025				
5. TOTAL ITEMIZED EXPENDITURES						2,068.76	
(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.)							



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <p style="text-align: center;">Paul Kaiser</p>					2. REPORT COVERING THE PERIOD FROM: 10/30/22 TO: 01/25/23							
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		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received		Loan Payments		Outstanding Loan Balance (End of Period)		
Last Name/Organization Name				Address		Loan Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)				Date of Loan		
City		State		Zip Code								
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) <small>(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.)</small>				Outstanding Loan Balance (Beginning of Period)		Loans Received		Loan Payments		Outstanding Loan Balance (End of Period)		



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Paul Kaiser			2. REPORT COVERING THE PERIOD			
			FROM: 10/30/22		TO: 01/25/23	
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.)						

