



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 3/25/2024 2.a. Candidate or Committee Name: Jana Swearengen Swearengen-Washington

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 10/5/2023

4. Campaign Address: 1838 South Parkway
 City: Memphis State: TN Zip Code: 38114 Phone: (901) 828-0598

5. Candidate Home Address: 1838 South Parkway
 City: Memphis State: TN Zip Code: 38114 Phone: (901) 828-0598
 Candidate Email Address: washingtonjana3@gmail.com

6. Office Sought: (include district number, if applicable) Memphis City Council, Dist. 4

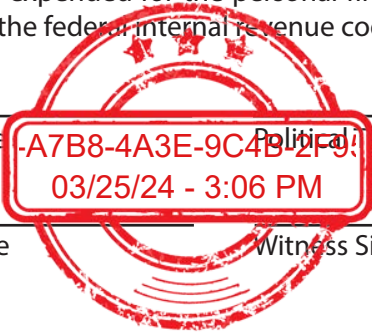
7. Name of Political Treasurer (may be candidate): Juliet Waddell Pittman
 Political Treasurer Email Address: waddell.juliet@yahoo.com

8. Category or Report: (check one)
 First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 Mid-Year Supplemental Year-End Supplemental Runoff Election

9. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023

10. Detailed Disclosure: (Check one)
 This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
 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.

11. 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.



 Candidate Signature Date: A7B8-4A3E-9C4B-2F9 Political Treasurer Signature Date

 Witness Signature Date Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$10,698.43</u>
b. Total Receipts This Period	\$ <u>\$7,050.00</u>
c. Total Disbursements This Period	\$ <u>\$11,370.20</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$6,378.23</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jana Swearengen Swearengen-Washington

14. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$700.00
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ \$6,350.00
- 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.) \$ \$7,050.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$11,370.20
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- 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.)..... \$ \$11,370.20

17. In-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. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jana Swearngen Swearngen-Washington
2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: PB & J Towing Svc. II LLC **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 788 So. Main St. City: Memphis State: TN Zip Code: 38106

Occupation: Business Employer: Self

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$500.00 Date of Contribution: 10/4/2023 Aggregate This Election: \$ \$500.00

Business or Organization Name: Legacy PAC **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 60 N. BB King Blvd. City: Memphis State: TN Zip Code: 38103

Occupation: Business Employer: Self

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$2,000.00 Date of Contribution: 10/4/2023 Aggregate This Election: \$ \$2,000.00

Business or Organization Name: Wright & Gray LLC **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 201 Saint Charles Ave. Ste. 2710 City: New Orleans State: LA Zip Code: 70170

Occupation: Business Employer: Unknown

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$500.00 Date of Contribution: 10/4/2023 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Joe Middle Name: _____ Last Name: Jarratt

Address: 1065 S. Perkins Rd. City: Memphis State: TN Zip Code: 38117

Occupation: Attorney Employer: Unknown

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$500.00 Date of Contribution: 10/4/2023 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$3,500.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jana Swearngen Swearngen-Washington
2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,500.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Joanna Middle Name: _____ Last Name: Burnett
Address: 261 Simpson Avenue City: Memphis State: TN Zip Code: 38106
Occupation: Unknown Employer: Unknown
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 10/4/2023 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: Tyrone Middle Name: Adam Last Name: Burroughs
Address: 2784 Calkins Creek Cove City: Germantown State: TN Zip Code: 38139
Occupation: Business Owner Employer: Self
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 10/4/2023 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: Blue Cross Blue Shield of Tennessee **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1 Cameron Hill Bldg. 1.5 City: Chattanooga State: TN Zip Code: 37402
Occupation: Business Employer: Self
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 10/4/2023 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**
First Name: Audrey Middle Name: _____ Last Name: Johnson
Address: Unknown City: Memphis State: TN Zip Code: 38114
Occupation: Unknown Employer: Unknown
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$600.00 Date of Contribution: 12/1/2023 Aggregate This Election: \$ \$600.00

Total Contributions: \$ \$6,350.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jana Swearngen Swearngen-Washington
2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: _____ **OR**
First Name: Jamiah Middle Name: _____ Last Name: Irby
Address: 943 Hollis F. Price St. City: Memphis State: TN Zip Code: 38126
Purpose of Expenditure: Poll worker 6 days
Amount of Expenditure: \$ \$750.00 Date of Expenditure: \$ 10/1/2023

Business or Organization Name: _____ **OR**
First Name: Kirby Middle Name: _____ Last Name: Jordan
Address: Unknown City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Placing signs on election day
Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: _____ **OR**
First Name: Celestine Middle Name: _____ Last Name: Foster
Address: 491 N. Highland St. City: Memphis State: TN Zip Code: 38122
Purpose of Expenditure: Canvassing putting door knockers on door knobs
Amount of Expenditure: \$ \$65.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: _____ **OR**
First Name: Angela Middle Name: _____ Last Name: Collins
Address: 3010 Woodhills Dr. City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Canvassing putting door knockers on door knobs
Amount of Expenditure: \$ \$65.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: _____ **OR**
First Name: Vermelle Middle Name: _____ Last Name: Marrion
Address: 5072 Applewood Dr. City: Memphis State: TN Zip Code: 38118
Purpose of Expenditure: Making tote bags and table clothes
Amount of Expenditure: \$ \$340.00 Date of Expenditure: \$ 10/3/2023

Total Expenditures: \$ \$1,420.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jana Swearngen Swearngen-Washington
2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,420.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: _____ **OR**
First Name: Angela Middle Name: _____ Last Name: Collins
Address: 3010 Woodhills Dr. City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Canvassing and organizing storage
Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: _____ **OR**
First Name: Angela Middle Name: _____ Last Name: Collins
Address: 3010 Woodhills Dr. City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Prepared lunches for poll workers
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 10/6/2023

Business or Organization Name: _____ **OR**
First Name: Celestine Middle Name: _____ Last Name: Foster
Address: 491 N. Highland St. City: Memphis State: TN Zip Code: 38122
Purpose of Expenditure: Prepared lunches for poll workers
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 10/6/2023

Business or Organization Name: _____ **OR**
First Name: Jay Middle Name: _____ Last Name: Richey
Address: Unknown City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Putting out and picking up signs
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 10/8/2023

Business or Organization Name: _____ **OR**
First Name: Robert Middle Name: Swearngen Last Name: Washington
Address: 1838 South Parkway City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: tickets for Willow Ad
Amount of Expenditure: \$ \$550.00 Date of Expenditure: \$ 11/15/2023

Total Expenditures: \$ \$2,620.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jana Swarengen Swarengen-Washington
2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,620.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: _____ **OR**
First Name: Jana Middle Name: Swarengen Last Name: Washington
Address: 1838 South Parkway City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Election Day Expenses
Amount of Expenditure: \$ \$408.55 Date of Expenditure: \$ 11/15/2023

Business or Organization Name: _____ **OR**
First Name: Robert Middle Name: Swarengen Last Name: Washington
Address: 1838 South Parkway City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Supplies from Lowes and Home Depot for signs
Amount of Expenditure: \$ \$246.70 Date of Expenditure: \$ 11/15/2023

Business or Organization Name: _____ **OR**
First Name: Jana Middle Name: Swarengen Last Name: Washington
Address: 1838 South Parkway City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Sponsorship for two buds for Willow program
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 11/27/2023

Business or Organization Name: _____ **OR**
First Name: Jay Middle Name: _____ Last Name: Richey
Address: Unknown City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Putting signs in storage
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 12/2/2023

Business or Organization Name: Regions Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2600 Lamar Ave. City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Monthly Bank Fee
Amount of Expenditure: \$ \$5.00 Date of Expenditure: \$ 10/2/2023

Total Expenditures: \$ \$3,780.25

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jana Swearengen Swearengen-Washington
2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,780.25

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Regions Bank **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2600 Lamar Ave. City: Memphis State: TN Zip Code: 38114

Purpose of Expenditure: Monthly Bank Fee

Amount of Expenditure: \$ \$5.00 Date of Expenditure: \$ 11/1/2023

Business or Organization Name: Regions Bank **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2600 Lamar Ave. City: Memphis State: TN Zip Code: 38114

Purpose of Expenditure: Monthly Bank Fee

Amount of Expenditure: \$ \$5.00 Date of Expenditure: \$ 12/1/2023

Business or Organization Name: Dorse and Associates **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 3268 N. Waynoka Circle City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Radio Advertisement

Amount of Expenditure: \$ \$2,315.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: Dorse and Associates **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 3268 N. Waynoka Circle City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Print Media

Amount of Expenditure: \$ \$612.00 Date of Expenditure: \$ 10/16/2023

Business or Organization Name: _____ **OR**

First Name: Jamita Middle Name: E Last Name: Swearengen

Address: 2005 Quinn Avenue City: Memphis State: TN Zip Code: 38114

Purpose of Expenditure: Truck rental

Amount of Expenditure: \$ \$382.00 Date of Expenditure: \$ 10/18/2023

Total Expenditures: \$ \$7,099.25

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jana Swearngen Swearngen-Washington
2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$7,099.25

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: _____ **OR**
First Name: Jana Middle Name: Swearngen Last Name: Washington
Address: 1838 South Parkway City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Pay for Poll workers on election day
Amount of Expenditure: \$ \$4,150.00 Date of Expenditure: \$ 10/5/2023

Business or Organization Name: _____ **OR**
First Name: Joyce Middle Name: _____ Last Name: Mickey
Address: Cable St. City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Maded Food
Amount of Expenditure: \$ \$90.00 Date of Expenditure: \$ 10/29/2023

Business or Organization Name: harland Clark **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Unknown City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: New Checks
Amount of Expenditure: \$ \$30.95 Date of Expenditure: \$ 11/3/2023

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ \$11,370.20

(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.)