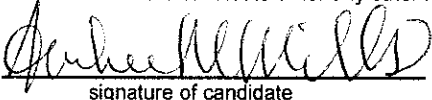
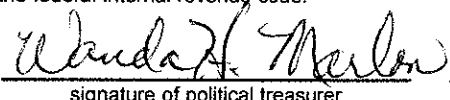
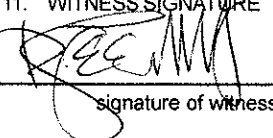
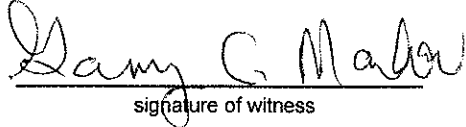


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT January 16, 2020		2.a. NAME OF CANDIDATE OR COMMITTEE Friends of Amber Mills		
2.b. IF COMMITTEE, NAME OF CANDIDATE Amber Mills		3. ELECTION DATE August 2022		
4.a. CAMPAIGN ADDRESS AND PHONE				
Street or Rural Route PO BOX 253	City Arlington	State TN	Zip Code 38002	Phone 901-592-5424
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)				
Street or Rural Route 12903 Shane Hollow Drive	City Arlington	State TN	Zip Code 38002	Phone 901-592-5424
5. OFFICE SOUGHT (include district number, if applicable) Shelby County Commission - District 1		6. NAME OF POLITICAL TREASURER (may be candidate) Wanda Marlow		
7. CATEGORY OR REPORT (Check one)				
<input type="checkbox"/> FIRST QUARTER	<input type="checkbox"/> SECOND QUARTER	<input type="checkbox"/> THIRD QUARTER	<input type="checkbox"/> FOURTH QUARTER	<input type="checkbox"/> PRE-PRIMARY
				<input type="checkbox"/> PRE-GENERAL
				<input type="checkbox"/> MID-YEAR SUPPLEMENTAL
				<input checked="" type="checkbox"/> YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD July 1, 2019		8.b. ENDING DATE OF REPORTING PERIOD January 15, 2020		
9. (Check one)				
a. <input checked="" type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)				
b. <input type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.				
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.				
 signature of candidate		ORGANIZED date	 signature of political treasurer	
			1-9-2020 date	
11. WITNESS SIGNATURE				
 signature of witness		1/8/20 date	 signature of witness	
			1-9-20 date	
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT		\$ <u>7325.60</u>		
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>500.00</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>0.00</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>7825.60</u>		
e. TOTAL LOANS OUTSTANDING		\$ <u>0.00</u>		
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0.00</u>		

