

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>10/27/18</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Friends For Mike Pelizzolo</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Mike Pelizzolo</u>		3. ELECTION DATE <u>November 6, 2018</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>2455 Arthur Road Germantown TN 38138 901.568.5568</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone			
5. OFFICE SOUGHT (include district number, if applicable) <u>Mayor - Germantown</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Mike Pelizzolo</u>	
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 checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>10/1/18</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>10/27/18</u>	
9. (Check one) a. <input 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 checked="" 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.			
<u>Mike Pelizzolo</u> signature of candidate		<u>Mike Pelizzolo</u> signature of political treasurer	
<u>10/27/18</u> date		<u>10/27/18</u> date	
11. WITNESS SIGNATURE			
<u>[Signature]</u> signature of witness		<u>[Signature]</u> signature of witness	
<u>10/27/18</u> date		<u>10/27/18</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>59,020.90</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>1,150.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>52,074.10</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>8,096.80</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>0</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Mike Pizzolo				2. REPORT COVERING THE PERIOD FROM: 10/1/18 TO: 10/27/18			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name Shiv A		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name Natarajan				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500.00	
Address 7465 Mimosa Dr.				<input type="checkbox"/> Runoff (Local Elections Only)			
City G-town		State IN	Zip Code 38138	Date of Contribution 9.30.18		Aggregate This Election 500.00	
Occupation Health care							
Employer							
First Name Sanjeev		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name Mittal				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500.00	
Address 7803 Dr Martin Lane				<input type="checkbox"/> Runoff (Local Elections Only)			
City G-town		State IN	Zip Code 38138	Date of Contribution 10-1-18		Aggregate This Election 500.00	
Occupation Health care							
Employer							
First Name Melinda		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name Fischer				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		-900.00	
Address 4221 Beaufort Cv.				<input type="checkbox"/> Runoff (Local Elections Only)			
City G-town		State IN	Zip Code 38138	Date of Contribution transport figure for reporting actually 100.00 from 2/30/18 report		Aggregate This Election	
Occupation Home maker							
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.)					1,000.00		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Mike Pelizzolo</i>		2. REPORT COVERING THE PERIOD FROM: <i>10/1/18</i> TO: <i>10/27/18</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>0</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Sutton Bros Advertising INC.</i>		<i>Advertising</i>	<i>18,003.00</i>
Address <i>254 Court Ave Floor 2</i>			
City <i>Mpls</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Journal West 10 Media</i>		<i>Shilby Sun Times Ads</i>	<i>600.00</i>
Address			
City <i>Mpls</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Sibby Lewis Farm Park Inc.</i>		<i>Sponsorship</i>	<i>720.00</i>
Address			
City <i>Gettysburg</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Gettysburg News</i>		<i>Advertising</i>	<i>500.00</i>
Address			
City <i>Gettysburg</i>	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Kilowatt's Club of Gettysburg</i>		<i>Dues</i>	<i>110.00</i>
Address			
City <i>Gettysburg</i>	State		
First Name <i>Hammer</i>	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Hooper</i>		<i>Email Marketing</i>	<i>500.00</i>
Address			
City <i>Chicago</i>	State		
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			<i>20,433.00</i>

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Mike Paluzzolo			2. REPORT COVERING THE PERIOD FROM: 10/1/18 TO: 10/27/18	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 20,433.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Sutton Reis Advertising Inc		Advertising		5603.55
Address				
City Mpls	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Sutton Reis Advertising, Inc.		Advertising		18,350.00
Address				
City Mpls	State TN			
First Name Dino	Middle Name	Purpose of Expenditure Reimburse USPS for Postage		Amount of Expenditure 2,004.00
Last Name/Business Name Paluzzolo				
Address 2053 Sunset RD				
City Gettysburg	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Sutton Reis Advertising INC		Advertising		5,603.55
Address				
City Mpls	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)				31,561.10