



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 7/15/2024 2.a. Candidate or Committee Name: Philip Spinosa

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

4. Campaign Address: 1661 Aaron Brenner Dr Ste 300
 City: Memphis State: TN Zip Code: 38120 Phone: 9017612720

5. Candidate Home Address: 198 Saint Andrews Fairway
 City: Memphis State: TN Zip Code: 38111 Phone: 9016520138
 Candidate Email Address: philipspinosa@me.com

6. Office Sought: (include district number, if applicable) Memphis City Council, Dist. 5

7. Name of Political Treasurer (may be candidate): Shea Flinn
 Political Treasurer Email Address: shea@flinn.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: 1/16/2024 End Date: 6/30/2024

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: _____ **E00D-4E58-A779-A105** Political Treasurer Signature Date

 Witness Signature Date _____ _____ Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$4,280.48</u>
b. Total Receipts This Period	\$ <u>\$250.00</u>
c. Total Disbursements This Period	\$ <u>\$2,574.31</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$1,956.17</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: Philip Spinosa

14. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(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) \$ \$250.00
- 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.) \$ \$250.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$2,574.31
(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.)..... \$ \$2,574.31

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: Philip Spinosa
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
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: S R Consulting LLC **OR**

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

Address: 5909 Shelby Oaks Dr Ste 200 City: Memphis State: TN Zip Code: 38134

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 3/22/2024 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ \$250.00

(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: Philip Spinosa
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
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: Watkins Uiberall PLLC **OR**

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

Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Accounting

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 2/15/2024

Business or Organization Name: Grind City Designs **OR**

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

Address: 5010 Summer Ave City: Memphis State: TN Zip Code: 38122

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$531.31 Date of Expenditure: \$ 1/16/2024

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

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

Address: 949 Shady Grove City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Bank Fee

Amount of Expenditure: \$ \$4.00 Date of Expenditure: \$ 2/25/2024

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

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

Address: 949 Shady Grove City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Bank Fee

Amount of Expenditure: \$ \$4.00 Date of Expenditure: \$ 3/29/2024

Business or Organization Name: One Tough Mother **OR**

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

Address: 2277 Massey Rd City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 6/14/2024

Total Expenditures: \$ \$1,539.31

(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: Philip Spinosa
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,539.31

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: Starbucks **OR**

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

Address: 6165 Poplar Ave City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Food and Beverage

Amount of Expenditure: \$ \$40.00 Date of Expenditure: \$ 3/29/2024

Business or Organization Name: Papa Johns **OR**

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

Address: 6515 Poplar Ave Ste 111 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Food and Beverage

Amount of Expenditure: \$ \$155.00 Date of Expenditure: \$ 3/29/2024

Business or Organization Name: Kroger **OR**

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

Address: 6660 Poplar Ave City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Food and Beverage

Amount of Expenditure: \$ \$65.00 Date of Expenditure: \$ 3/29/2024

Business or Organization Name: Starbucks **OR**

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

Address: 6165 Poplar Ave City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Food and Beverage

Amount of Expenditure: \$ \$35.00 Date of Expenditure: \$ 1/16/2024

Business or Organization Name: St Michaels Golf Event **OR**

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

Address: 3863 Summer Ave City: Memphis State: TN Zip Code: 38122

Purpose of Expenditure: Sponsorship

Amount of Expenditure: \$ \$240.00 Date of Expenditure: \$ 3/29/2024

Total Expenditures: \$ \$2,074.31

(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: Philip Spinosa
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,074.31

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: Krystals **OR**

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

Address: 206 S Germantown Pkwy City: Cordova State: TN Zip Code: 38018

Purpose of Expenditure: Food and Beverage

Amount of Expenditure: \$ \$170.00 Date of Expenditure: \$ 2/25/2024

Business or Organization Name: Lester Community Center **OR**

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

Address: 317 Tillman St City: Memphis State: TN Zip Code: 38112

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 2/25/2024

Business or Organization Name: Shell **OR**

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

Address: 2956 Walnut Grove Rd City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$30.00 Date of Expenditure: \$ 2/25/2024

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: \$ \$2,574.31

(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.)