



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 7/26/2024 2.a. Candidate or Committee Name: Mike Wissman

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/1/2024

4. Campaign Address: 5002 Brian Ridge Rd
 City: Arlington State: TN Zip Code: 38002 Phone: _____

5. Candidate Home Address: 5002 Brian Ridge Rd
 City: Arlington State: TN Zip Code: 38002 Phone: 9014610508
 Candidate Email Address: mwissmanjr@comcast.net

6. Office Sought: (include district number, if applicable) Arlington Mayor

7. Name of Political Treasurer (may be candidate): Mike Wissman
 Political Treasurer Email Address: mwissmanjr@comcast.net

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: 4/1/2024 End Date: 7/24/2024

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: _____ **F83D-4DF4-8DB6-CEA** Political Treasurer Signature Date

 Witness Signature Date: _____ _____ Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$0.00</u>
b. Total Receipts This Period	\$ <u>\$3,000.00</u>
c. Total Disbursements This Period	\$ <u>\$2,363.00</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$637.00</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: Mike Wissman

14. Reporting Period: Start Date: 4/1/2024 End Date: 7/24/2024

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$500.00
(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) \$ \$2,500.00
- 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.) \$ \$3,000.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$2,363.00
(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.)..... \$ \$2,363.00

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: Mike Wissman
2. Reporting Period: Start Date: 4/1/2024 End Date: 7/24/2024
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: IAFF FIREPAC **OR**

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

Address: 1750 New York Ave, NW City: Washington State: DC Zip Code: 20006

Occupation: Fire Employer: IAFF

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

Amount of Contribution: \$ \$2,500.00 Date of Contribution: 6/21/2024 Aggregate This Election: \$ \$2,500.00

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: \$ \$2,500.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Mike Wissman
2. Reporting Period: Start Date: 4/1/2024 End Date: 7/24/2024
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: Mid-South Solutions OR

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

Address: 2209 Whitten Rd City: Memphis State: TN Zip Code: 38133

Purpose of Expenditure: T-shirts

Amount of Expenditure: \$ \$896.00 Date of Expenditure: \$ 7/9/2024

Business or Organization Name: Mid-South Solutions OR

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

Address: 2209 Whitten Rd City: Memphis State: TN Zip Code: 38133

Purpose of Expenditure: T-shirts

Amount of Expenditure: \$ \$512.00 Date of Expenditure: \$ 7/24/2024

Business or Organization Name: _____ OR

First Name: Mike Middle Name: Wissman Last Name: Unitemized expense

Address: 5002 Brian Ridge Rd City: Arlington State: TN Zip Code: 38002

Purpose of Expenditure: Print, mail, fuel delivery

Amount of Expenditure: \$ \$955.00 Date of Expenditure: \$ 7/8/2024

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: \$ \$2,363.00

(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.)