



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

ORIGINAL DOCUMENT
 PHOTOCOPY CANNOT BE
 ACCEPTED TCA 2-5-102

JUL 19 2023 14:04:49

1. Date: 7-1-23 2.a. Candidate or Committee Name: Friends of Allan Creasy
 2.b. If Committee, Name of Candidate: Allan Creasy 3. Election Date: _____
 4. Campaign Address: 4920 Marcel W.
 City: Memphis State: TN Zip Code: ~~38128~~ 38122 Phone: 401-503-1889
 5. Candidate Home Address: same
 City: _____ State: _____ Zip Code: _____ Phone: _____
 Candidate Email Address: creasy.allan@gmail.com
 6. Office Sought: (include district number, if applicable) TN Democratic Party Committeeman 30
 7. Name of Political Treasurer (may be candidate): Jeff Etheridge
 Political Treasurer Email Address: jeffetheridge901@gmail.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

9. Reporting Period: Start Date: 1/1/23 End Date: 6/30/23

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.

<u>Allan Creasy</u> Candidate Signature	<u>7/13/23</u> Date	<u>Jeff Etheridge</u> Political Treasurer Signature	<u>7/13/23</u> Date
<u>Barbara Etheridge</u> Witness Signature	<u>7/13/23</u> Date	<u>Barbara Etheridge</u> Witness Signature	<u>7/13/23</u> Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>0</u>
b. Total Receipts This Period	\$ 480.60 <u>480.60</u>
c. Total Disbursements This Period	\$ <u>22.15</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>458.45</u>
e. Total Loans Outstanding	\$ <u>-0-</u>
f. Total Obligations Outstanding	\$ <u>-0-</u>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends of Allan Creasy
2. Reporting Period: Start Date: 11/1/23 End Date: 6/30/23
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Allan Middle Name: _____ Last Name: Creasy
Address: 4920 Marcel Ct. City: Memphis State: TN Zip Code: 38122
Occupation: Bartender Employer: Memphis Made
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 4/18/23 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.)