



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7-29-24 2.a. Candidate or Committee Name: Towanna Murphy
 2.b. If Committee, Name of Candidate: Friends of Towanna Murphy 3. Election Date: August 1st 2024
 4. Campaign Address: 567 Weizman
 City: Memphis State: TN Zip Code: 38117 Phone: 901-335-9785
 5. Candidate Home Address: 3321 Burgess Dr
 City: Memphis State: TN Zip Code: 38118 Phone: 901-437-2717
 Candidate Email Address: Electtowannamurphy4sb7@gmail.com
 6. Office Sought: (include district number, if applicable) County School Board District 7
 7. Name of Political Treasurer (may be candidate): George D. Summers
 Political Treasurer Email Address: dempsys@hotmail.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: 04-01-2024 End Date: 06-30-2024

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.

	<u>7/31/2024</u>		<u>7/31/24</u>
Candidate Signature	Date	Political Treasurer Signature	Date
	<u>7-31-24</u>		<u>7-31-24</u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>0</u>
b. Total Receipts This Period	\$ <u>1,345.00</u>
c. Total Disbursements This Period	\$ <u>1,247.66</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>97.34</u>
e. Total Loans Outstanding	\$ <u>100.00</u>
f. Total Obligations Outstanding	\$ <u>971.30</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Towanna Murphy

14. Reporting Period: Start Date: 4-1-24 End Date: 6-30-24

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 20.00
(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) \$ 1,225.00
- c. Loans Received This Reporting Period \$ 100.00
- 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.) \$ 1,345.00

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 1,247.66
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) \$ 1,247.66

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.) \$ 971.30

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Towanna Murphy
2. Reporting Period: Start Date: 4-1-2024 End Date: 6-30-2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Rickey Middle Name: _____ Last Name: Peete
Address: 915 N. McLean Blvd City: Memphis State: TN Zip Code: 38107
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 150.00 Date of Contribution: 5-13-24 Aggregate This Election: \$ 150.00

Business or Organization Name: _____ OR
First Name: Gerald Middle Name: _____ Last Name: Kiner
Address: 4400 Hickory Hill Rd City: Memphis State: TN Zip Code: 38141
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 5-13-24 Aggregate This Election: \$ 500.00

Business or Organization Name: _____ OR
First Name: Joe Middle Name: _____ Last Name: Ford
Address: 1616 Winchester City: Memphis State: TN Zip Code: 38116
Occupation: Funeral Director Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 6-7-24 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ OR
First Name: JB Middle Name: _____ Last Name: Smiley
Address: 254 Court City: Memphis State: TN Zip Code: 38103
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 125.00 Date of Contribution: 6-11-24 Aggregate This Election: \$ 125.00

Total Contributions: \$ 1,025.00

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Towanna Murphy
2. Reporting Period: Start Date: 4-1-2024 End Date: 6-30-2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,025.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Larry Middle Name: _____ Last Name: Rucker
Address: 1298 Semmes St City: Memphis State: TN Zip Code: 38111
Occupation: Pastor Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 6-14-24 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: Bennie Middle Name: _____ Last Name: Cobb
Address: 10749 Chapel Hill Rd City: Arlington State: TN Zip Code: 38002
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 6-17-24 Aggregate This Election: \$ 100.00

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: \$ _____

Total Contributions: \$ 1,225.00

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Towanna Murphy
2. Reporting Period: Start Date: 4-1-24 End Date: 6-30-24
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 0
(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Towanna Murphy
2. Reporting Period: Start Date: 4-1-24 End Date: 6-30-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

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: Harland Clarke - Regions Bank OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Checks for Campaign Account
Amount of Expenditure: \$ 23.43 Date of Expenditure: 5-17-24

Business or Organization Name: Grind Global LLC OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3885 S. Perkins Suite 2 City: Memphis State: TN Zip Code: 38118
Purpose of Expenditure: Campaign T-Shirts
Amount of Expenditure: \$ 228.28 Date of Expenditure: 5-17-24

Business or Organization Name: Act Blue OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Friends of Towanna Murphy Electronic Contribution Fee
Amount of Expenditure: \$ 13.69 Date of Expenditure: 4-1-24 Thur 6-30-24

Business or Organization Name: Diamond Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 611 N. Third City: Memphis State: TN Zip Code: 38107
Purpose of Expenditure: Lg 4x4 Campaign Signs
Amount of Expenditure: \$ 982.26 Date of Expenditure: 6-20-24

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: \$ 1,247.66
(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Towanna Murphy
2. Reporting Period: Start Date: 4-1-24 End Date: 6-30-24
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ OR
First Name: Towanna Middle Name: _____ Last Name: Murphy
Address: 3321 Burgess City: Memphis State: TN Zip Code: 38118
Outstanding Loan Balance (Beginning) \$ 0
Loans Received \$ 100.00
Loan Payments \$ 0
Outstanding Loan (End)..... \$ _____
Loan Received For: Primary Election General Election Runoff (Local Elections Only)
Date of Loan: _____

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ 0
Loans Received \$ 100.00
Loan Payments \$ 0
Outstanding Loan (End)..... \$ 100.00

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Towanna Murphy
2. Reporting Period: Start Date: 4-1-2024 End Date: 6-30-2024
3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____	Description of Obligation: <u>6-8-24 CK# 9859</u>		
First Name: <u>George</u> Middle Name: <u>Dempsey</u>	Campaign yard signs		
Last Name: <u>Summers</u>	Paid to Telisa Franklin		
Address: <u>567 Weizman</u>	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period
City: <u>Memphis</u>			Outstanding Balance (Period End)
State: <u>TN</u> Zip Code: <u>38117</u>	\$ 0	\$ 950.00	\$ 0
			\$ 950.00

Business Name: _____	Description of Obligation: <u>6-30-24</u>		
First Name: <u>George</u> Middle Name: <u>Dempsey</u>	Candidate and Treasurer meeting w/meal		
Last Name: <u>Summers</u>			
Address: <u>567 Weizman</u>	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period
City: <u>Memphis</u>			Outstanding Balance (Period End)
State: <u>TN</u> Zip Code: <u>38117</u>	\$ 0	\$ 21.30	\$ 0
			\$ 21.30

Business Name: _____	Description of Obligation:		
First Name: _____ Middle Name: _____			
Last Name: _____			
Address: _____	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period
City: _____			Outstanding Balance (Period End)
State: _____ Zip Code: _____	\$	\$	\$
			\$

Business Name: _____	Description of Obligation:		
First Name: _____ Middle Name: _____			
Last Name: _____			
Address: _____	Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period
City: _____			Outstanding Balance (Period End)
State: _____ Zip Code: _____	\$	\$	\$
			\$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 0	\$ 971.30	\$ 0	\$ 971.30