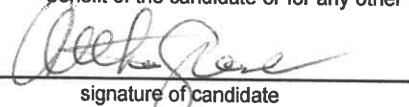
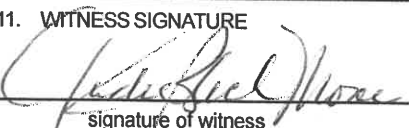
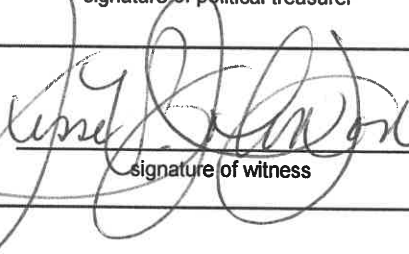


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ORIGINAL DOCUMENT
PHOTOCOPY CANNOT BE
ACCEPTED**CAMPAIGN FINANCIAL DISCLOSURE STATEMENT****For State and Local Candidates
For Single-Candidate Committees**

1. DATE OF REPORT 11/01/22		2.a. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Althea Greene County Commission Dist. 7		
2.b. IF COMMITTEE, NAME OF CANDIDATE Althea Greene			3. ELECTION DATE May 3, 2022	
4.a. CAMPAIGN ADDRESS AND PHONE				
Street or Rural Route 924 Hawthorne St.	City Memphis	State TN	Zip Code 38107	Phone 901.233.5082
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) County Commission - District 7		6. NAME OF POLITICAL TREASURER (may be candidate) Brian Malone		
7. CATEGORY OR REPORT (Check one)				
☐ FIRST QUARTER	☐ SECOND QUARTER	☐ THIRD QUARTER	☐ FOURTH QUARTER	☐ PRE- PRIMARY
				☐ PRE- GENERAL
				☐ MID-YEAR SUPPLEMENTAL
				☐ YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD 04/01/2022		8.b. ENDING DATE OF REPORTING PERIOD 04/23/2022		
9. (Check one)				
a. ☐ 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. ☐ 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.				
signature of candidate 		date 11/15/22		signature of political treasurer Brian Malone
				date 11/16/22
11. WITNESS SIGNATURE				
signature of witness 		date 11/15/22		signature of witness 
				date 11/16/22
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT		\$ 9,072.00		
b. TOTAL RECEIPTS THIS PERIOD		\$ 11,960.00		
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ 5,418.00		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ 15,614.00		
e. TOTAL LOANS OUTSTANDING		\$ -0-		
f. TOTAL OBLIGATIONS OUTSTANDING		\$ -0-		



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Committee to Elect Althea Greene County Commission Dist. 7	14. REPORT COVERING THE PERIOD FROM: 04/01/2022 TO: 04/23/2022
--	---

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

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

b. Itemized Contributions (over \$100 from each source this period) \$ _____

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ _____

16. LOANS RECEIVED THIS REPORTING PERIOD \$ _____

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ _____

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ _____

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Total of Expenditures (\$100 or less each payee) \$ _____

b. Itemized Expenditures (Over \$100 each payee this period) \$ _____

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ _____

20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ _____

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ _____

b. Itemized in-kind contributions (over \$100 from each source this period) \$ _____

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ _____

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ _____

b. Itemized Obligations Outstanding (Over \$100 each) \$ _____

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ _____



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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Althea Greene County Commission District 7				2. REPORT COVERING THE PERIOD FROM: 04/01/2022 TO: 04/23/2022		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				☐ Primary Election ☐ General Election		
Address				☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				☐ Primary Election ☐ General Election		
Address				☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				☐ Primary Election ☐ General Election		
Address				☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				☐ Primary Election ☐ General Election		
Address				☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				☐ Primary Election ☐ General Election		
Address				☐ 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.)						



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Althea Greene County Commission District 7				2. REPORT COVERING THE PERIOD	
				FROM: 04/01/2022	TO: 04/01/2022
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election	
				☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election	
				☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election	
				☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election	
				☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election	
				☐ Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS					
(Carry forward to item 3. of 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 item 22b. of summary.)					



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount	
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						
Address						
City	State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name						
Address						
City	State	Zip Code				
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.)						



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD	
					FROM:	TO:
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)						
Complete the Following for the Source of the Loan						
First Name	Middle Name	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name						
Address		Loan Received For:			Date of Loan	
City		State	Zip Code	☐ Primary Election ☐ General Election		
				☐ Runoff (Local Elections Only)		
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)						
First Name		Middle Name		First Name		Middle Name
Last Name/Organization Name				Last Name/Organization Name		
Address				Address		
City		State	Zip Code	City		State
				City		State
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding		
First Name		Middle Name		First Name		Middle Name
Last Name/Organization Name				Last Name/Organization Name		
Address				Address		
City		State	Zip Code	City		State
				City		State
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding		
First Name		Middle Name		First Name		Middle Name
Last Name/Organization Name				Last Name/Organization Name		
Address				Address		
City		State	Zip Code	City		State
				City		State
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding		
First Name		Middle Name		First Name		Middle Name
Last Name/Organization Name				Last Name/Organization Name		
Address				Address		
City		State	Zip Code	City		State
				City		State
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding		
4. Totals for all Loans (complete on last page of itemized loans)						
(Total loans received should also be shown in item 16, on summary page.)		Outstanding Loan Balance (Beginning of Period)		Loans Received		Loan Payments
(Total loan payments should also be shown in item 20, on summary page.)						
(Total outstanding loan balance should also be shown in item 12.e, on front page.)						



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
				FROM:		TO:	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							



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	A	B	C	D	E	F	G
1	Thomas Long		Memphis	TN		Direct Mail piece	\$1,000
2							
3	T'Andre Morris	7660 Carri Layne, Apt 12A	Southaven	MS	38671	Poll worker	\$400
4	Selena Jameson	1633 Pennsylvania, #326	Memphis	TN	38109	Poll Worker	\$700
5	Josephine Adams	3744 Danna Drive	Memphis	TN	38127	Poll Worker	\$600
6	Teshara Mangum	6075 Summer Trace Dr. #205	Memphis	TN	38134	Poll Worker	\$300
7	Samuel Sanders		Memphis	TN	38128	POLL worker	\$800
8	Gloria Burt		Memphis	TN	38118	Poll worker	\$800
9	Lorine Franklin		Memphis	TN	38103	Poll worker	\$700
10	Sam's Store					Snacks for poll workers	\$118
11	Total						\$5,418

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	A	B	C	D	E	F	G	H	I	J
1	Norman Redwing	7864	Memphis	TN		President	Not		4/1/2022	\$300
2	Sandra Hannah	Macon Road	Cordova	TN	38018	Not Employed	Memphis and Shelby Schools		4/2/2022	\$25
3	Jamie Walker	10167 Eveninghill Drive	Cordova	TN	38016	IT Field Technician	Vision Prep Charter School		4/3/2022	\$100
4	Tom Benton	Denali Park Drive	Collierville	TN	38017	Educator			4/3/2022	\$250
5	James Boyd	Shadowwood Lane	Memphis	TN	38119	Not Employed			4/4/2022	\$100
6	Miranda White	7712 Keri Cove	Olive Branch	MS	38654	FNP	Pawm		4/5/2022	\$10
7	Phyllis Ware	8396 Wood Manor Cove	Cordova	TN	38106	Not Employed			4/5/2022	\$100
8	Sherry Brooks	7211 Kingsland Drive	Memphis	TN	38125	Surgery Scheduler	TUG		4/7/2022	\$25

	A	B	C	D	E	F	G	H	I	J
9	Tennessee Property PAC	5316 Moss Hollow Cove	Memphis	TN	38134	Not Employed	Not Employed		4/7/2022	\$8,300
10	Jeraldine Seay			TN	38134	Not Employed			4/9/2022	\$25
11	Myra Govea De Acre	801 Leighton Cove	Collierville	TN	38017	Teacher	Memphis and Shelby Schools		4/9/2022	\$50
12	Jenny Wilford	4277 Sequoia 1729	Memphis	TN	38117	Teacher	SCS		4/9/2022	\$100
13	Angela Coiley	Meadow Bark Cove	Cordova	TN	38106	Speech Pathologist	Life Communications		4/9/2022	\$100
14	Gregory White	7712 Keri Cove	Olive Branch	MS	38654	Maintenance	FEDEX		4/9/2022	\$100
15	Cedric Brown	1132 Island Place E	Memphis	TN	38103	Self	Sales		4/9/2022	\$100
16	Angie Berry	9415 Greywo od Cove	Cordova	TN	38018	Teacher	SCS		4/10/2022	\$100

	A	B	C	D	E	F	G	H	I	J
17	Genard Phillips	5107 Wemberley Drive	Memphis	TN	38125	Chief of Business Ops	Shelb County Schools		4/10/2022	\$100
18	David Middleton	3240 James Road	Memphis	TN	38128	Staff Pastor	Golden Gate Cathedral		4/10/2022	\$100
19	Dana Taylor	2207 S. Lauderdale Street	Memphis	TN	38106	Morticia	After Life		4/11/2022	\$100
20	Constance King								4/13/2022	\$100
21	Florence Hevery	651 Jefferson Avenue	Memphis	TN	38105	CEO	CMI Healthcare Services		4/13/2022	\$500
22	Pamela Wherry	10419 Valley Run Lane		TN	38106	Funeral Director	NJ Ford		4/15/2022	\$250
23	BlueCross BlueShield of Tennessee State PAC	3200 West End Ave, Suite 102	Nashville	TN	37203				4/19/2022	\$1,000

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[illegible]