



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

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

1. Date: 3/8/26 2.a. Candidate or Committee Name: Timothy Green Jr.  
 2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: 8/4/22  
 4. Campaign Address: 5394 Blue Diamond St.  
 City: Memphis State: TN Zip Code: 38109 Phone: 901-493-8458  
 5. Candidate Home Address: 5394 Blue Diamond St.  
 City: Memphis State: TN Zip Code: 38109 Phone: 901-493-8458  
 Candidate Email Address: tlgreen84@gmail.com  
 6. Office Sought: (include district number, if applicable) Memphis-Shelby County School Board - 6  
 7. Name of Political Treasurer (may be candidate): Courtney Miller  
 Political Treasurer Email Address: Courtney.wmiller28@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     Runoff Election

9. Reporting Period: Start Date: 01/16/23 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>3/13/26</u>		<u>3/13/26</u>
Candidate Signature	Date	Political Treasurer Signature	Date
	<u>3-13-26</u>		<u>3-13-26</u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report .....	\$ <u>3,289.82</u>
b. Total Receipts This Period .....	\$ <u>0</u>
c. Total Disbursements This Period .....	\$ <u>3,289.82</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$ <u>0</u>
e. Total Loans Outstanding .....	\$ <u>0</u>
f. Total Obligations Outstanding .....	\$ <u>0</u>

# SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Timothy Green Jr.

14. Reporting Period: Start Date: 1/16/23 End Date: 6/30/23

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 0  
(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) ..... \$ 0
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period ..... \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... \$ 0

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$3,294.28  
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period ..... \$ 0
- c. Total Obligation Payments Made This Period..... \$ 4.46
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$3,289.82

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period ..... \$ 0
- b. Itemized In-Kind Contributions Received This Period ..... \$ 4.46
- c. Total In-Kind Contributions Received This Period ..... \$ 4.46

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) ..... \$ 0

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

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

- 1. Candidate or Committee Name: Timothy Green Jr
- 2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
- 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: EZ Cater - Lenny's Subs OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 107.13 Date of Expenditure: 7/29/22

Business or Organization Name: EZ Cater - Tops BBQ OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 105.36 Date of Expenditure: 7/28/22

Business or Organization Name: EZ Cater - Lenny's Grill OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 117.87 Date of Expenditure: 7/27/22

Business or Organization Name: ~~EZ Cater - Lenny's Deli~~ OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ ~~117.87~~ Date of Expenditure: ~~7/27/22~~

Business or Organization Name: Google LLC - Gsuite OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 26.34 Date of Expenditure: 9/2/22

Total Expenditures: \$ 356.70

(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

- Candidate or Committee Name: Timothy Green Jr
- Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
- Total campaign expenditures from preceding page (enter \$0 if first page) \$ 356.70

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: Trust Bank OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: Service Charge  
 Amount of Expenditure: \$ 3.00 Date of Expenditure: \$ 1/23/23

Business or Organization Name: Trust Bank OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: Service Charge  
 Amount of Expenditure: \$ .92 Date of Expenditure: \$ 3/21/23

Business or Organization Name: ~~Trust Bank~~ OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: ~~Charge~~  
 Amount of Expenditure: \$ ~~4.00~~ Date of Expenditure: \$ ~~7/29/22~~

Business or Organization Name: Andree Jones OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: Poll Worker  
 Amount of Expenditure: \$ 780.00 Date of Expenditure: \$ 7/29/22

Business or Organization Name: EZ Cater - Jason's Deli OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: 40 Water St, 5th floor city: Boston State: MA Zip Code: 02109  
 Purpose of Expenditure: lunch for Poll workers  
 Amount of Expenditure: \$ 147.37 Date of Expenditure: \$ 7/26/22

Total Expenditures: \$ 931.29

(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: Timothy Green Jr
- 2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
- 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 931.29

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: Google LLC Gsuite OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: 1600 Amphitheatre Pkwy City: Mountain View State: CA Zip Code: 94043  
 Purpose of Expenditure: Email account  
 Amount of Expenditure: \$ 26.34 Date of Expenditure: \$ 2/2/23

Business or Organization Name: Trust Bank OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: Negative Account Balance fee  
 Amount of Expenditure: \$ 36.00 Date of Expenditure: \$ 2/8/23

Business or Organization Name: Service Charge Trust Bank OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: Service Charge  
 Amount of Expenditure: \$ 3.00 Date of Expenditure: \$ 2/21/23

Business or Organization Name: Hootsuite OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: Mass Email Site - to social media scheduler  
 Amount of Expenditure: \$ 82.31 Date of Expenditure: \$ 1/20/23

Business or Organization Name: Mailchimp OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: Mass Email - Comms Client  
 Amount of Expenditure: \$ 29.08 Date of Expenditure: \$ 1/23/23

Total Expenditures: \$ 176.73

(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.)



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# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

- 1. Candidate or Committee Name: Timothy Green Jr
- 2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
- 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 176.73

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: Carr Marketing OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: 131 Honeycomb Ct. City: Encinitas State: CA Zip Code: 92024  
 Purpose of Expenditure: Robo calls  
 Amount of Expenditure: \$ 1,580.70 Date of Expenditure: \$ 7/30/22

Business or Organization Name: Truist Bank OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: 3585 Hacks Cross City: Memphis State: TN Zip Code: 38125  
 Purpose of Expenditure: Overdraft fee  
 Amount of Expenditure: \$ 36.00 Date of Expenditure: \$ 1/17/23

Business or Organization Name: Truist Bank OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: 3585 Hacks Cross City: Memphis State: TN Zip Code: 38125  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 36.00 Date of Expenditure: \$ 1/20/23

Business or Organization Name: Truist Bank OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 36.00 Date of Expenditure: \$ 1/23/23

Business or Organization Name: Truist Bank OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 36.00 Date of Expenditure: \$ 2/02/23

Total Expenditures: \$ 1,717.40

(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: Timothy Green Jr

2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023

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: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Outstanding Loan Balance (Beginning) ..... \$ \_\_\_\_\_

Loans Received ..... \$ \_\_\_\_\_

Loan Payments ..... \$ \_\_\_\_\_

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) ..... \$ \_\_\_\_\_

Loans Received ..... \$ \_\_\_\_\_

Loan Payments ..... \$ \_\_\_\_\_

Outstanding Loan (End)..... \$ \_\_\_\_\_

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# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

- 1. Candidate or Committee Name: Timothy Green Jr.
- 2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
- 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1,717.40

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: ACT Blue OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 4.98 Date of Expenditure: 9/6/22

Business or Organization Name: Hootsuite OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 81.94 Date of Expenditure: 9/20/22

Business or Organization Name: Mailchimp OR  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Purpose of Expenditure: \_\_\_\_\_  
 Amount of Expenditure: \$ 25.24 Date of Expenditure: 9/23/22

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: \$ 112.16

(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.)



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# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

- Candidate or Committee Name: Timothy Green Jr
- Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
- Total in-kind contributions from preceding page (enter \$0 if first page) \$ \_\_\_\_\_

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: \$ \_\_\_\_\_  
(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Timothy Green Jr
2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
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: \_\_\_\_\_ 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: \$ \_\_\_\_\_

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: \$ \_\_\_\_\_

(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 OBLIGATIONS - CANDIDATE

- Candidate or Committee Name: Timothy Green Jr.
- Reporting Period: Start Date: 1/16/23 End Date: 6/30/23
- Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: Trust Bank

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: Memphis

State: TN Zip Code: 38125

Description of Obligation:	<u>Forgiven by vendor / charged off</u>		
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 4.46	\$ 0	\$ 4.46	\$ 0

Business Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

**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	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

