



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. Date: 7/15/2024      2.a. Candidate or Committee Name: Paul Young

2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: 10/5/2023

4. Campaign Address: 1661 Aaron Brenner Dr Ste 300  
 City: Memphis      State: TN      Zip Code: 38120      Phone: 9017612720

5. Candidate Home Address: 5824 Garden River Cove  
 City: Memphis      State: TN      Zip Code: 38120      Phone: 9017612720  
 Candidate Email Address: paul@youngformemphis.com

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

7. Name of Political Treasurer (may be candidate): Cassandra Webster  
 Political Treasurer Email Address: chugheswebster@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: 1/16/2024      End Date: 6/30/2024

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.

\_\_\_\_\_  
 Candidate Signature      Date: 07/15/24 - 1:41 PM      \_\_\_\_\_  
 \_\_\_\_\_  
 Political Treasurer Signature      Date

\_\_\_\_\_  
 Witness Signature      Date      \_\_\_\_\_  
 \_\_\_\_\_  
 Witness Signature      Date

12. Summary:

a. Balance On Hand Last Report .....	\$ <u>\$27,261.89</u>
b. Total Receipts This Period .....	\$ <u>\$20,400.97</u>
c. Total Disbursements This Period .....	\$ <u>\$13,857.35</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$ <u>\$33,805.51</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: Paul Young

14. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ \_\_\_\_\_  
(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) ..... \$ \$20,400.97
- 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.) ..... \$ \$20,400.97

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$13,857.35  
(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.)..... \$ \$13,857.35

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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
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: \_\_\_\_\_ **OR**  
First Name: Darrell Middle Name: \_\_\_\_\_ Last Name: Anderson  
Address: 2785 Autumn Lake Lane City: Decatur State: GA Zip Code: 30034  
Occupation: Entrepreneur Employer: National Limousine Service  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,800.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Lori Middle Name: \_\_\_\_\_ Last Name: Anderson  
Address: 2785 Autumn Lake Lane City: Decatur State: GA Zip Code: 30034  
Occupation: Homemaker Employer: None  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$200.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$200.00

Business or Organization Name: BuildPAC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 505 Halle Park Drive City: Collierville State: TN Zip Code: 38017  
Occupation: NA Employer: NA  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$5,000.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$5,000.00

Business or Organization Name: Comcast PAC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1701 JFK Blvd City: Philadelphia State: PA Zip Code: 19103  
Occupation: NA Employer: NA  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$5,000.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$5,000.00

Total Contributions: \$ \$12,000.00

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$12,000.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Elizabeth Wiggs Photography **OR**

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

Address: 6887 Trowbridge Cv City: Germantown State: TN Zip Code: 38138

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$9.84 Date of Contribution: 1/16/2024 Aggregate This Election: \$ \$9.84

Business or Organization Name: Elizabeth Wiggs Photography **OR**

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

Address: 6887 Trowbridge Cv City: Germantown State: TN Zip Code: 38138

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$9.84 Date of Contribution: 2/15/2024 Aggregate This Election: \$ \$9.84

Business or Organization Name: Elizabeth Wiggs Photography **OR**

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

Address: 6887 Trowbridge Cv City: Germantown State: TN Zip Code: 38138

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$9.84 Date of Contribution: 3/15/2024 Aggregate This Election: \$ \$9.84

Business or Organization Name: Farris Bobango PLC PAC **OR**

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

Address: 999 S Shady Grove Rd Ste 500 City: Memphis State: TN Zip Code: 38120

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$2,500.0 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$2,500.0

Total Contributions: \$ \$14,529.52

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$14,529.52

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: David Middle Name: \_\_\_\_\_ Last Name: Hoback  
Address: 6709 Garden Oaks City: Memphis State: TN Zip Code: 38120  
Occupation: Attorney Employer: The Crump Firm  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,800.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Rayford Middle Name: \_\_\_\_\_ Last Name: Jackson  
Address: 1646 Campau Farms Cir City: Detroit State: MI Zip Code: 48207  
Occupation: Owner Employer: Raymond Homes  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$500.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Elise Middle Name: \_\_\_\_\_ Last Name: Jordan  
Address: PO Box 491694 City: Lawrenceville State: GA Zip Code: 30049  
Occupation: Commercial Real Estate Employer: Metropolis Real Estate  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$101.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$101.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Stan Middle Name: \_\_\_\_\_ Last Name: King  
Address: 1391 Lanier Mnr NE City: Brookhaven State: GA Zip Code: 30319  
Occupation: Owner Employer: King Trinity Property LLC  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$1,000.00

Total Contributions: \$ \$17,930.52

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$17,930.52

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: New Horizon Steel **OR**

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

Address: 411 E 75th Street City: Chicago State: IL Zip Code: 60619

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: Norfolk Southern Corp **OR**

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

Address: 650 W Peachtree Street NW City: Atlanta State: GA Zip Code: 30308

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 2/15/2024 Aggregate This Election: \$ \$500.00

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: Sharon Middle Name: \_\_\_\_\_ Last Name: Queen

Address: 1018 Marlin Rd City: Memphis State: TN Zip Code: 38116

Occupation: Office Manager Employer: Youth Villages

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

Amount of Contribution: \$ (\$30.00) Date of Contribution: 1/22/2024 Aggregate This Election: \$ (\$30.00)

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: Sharon Middle Name: \_\_\_\_\_ Last Name: Queen

Address: 1018 Marlin Rd City: Memphis State: TN Zip Code: 38116

Occupation: Office Manager Employer: Youth Villages

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

Amount of Contribution: \$ \$0.45 Date of Contribution: 1/22/2024 Aggregate This Election: \$ \$0.45

Total Contributions: \$ \$19,400.97

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$19,400.97

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Thyme Middle Name: \_\_\_\_\_ Last Name: Spears  
Address: 1155 Abercorn Dr SW City: Atlanta State: GA Zip Code: 30331  
Occupation: Owner Employer: The Jardine Corporation  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$500.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Talbis Middle Name: C Last Name: Howell  
Address: 6 Office Park Circle Ste 215 City: Birmingham State: AL Zip Code: 35223  
Occupation: GP Educational Services Employer: BP Business Development  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$500.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ \$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: \$ \_\_\_\_\_

Total Contributions: \$ \$20,400.97

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
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: Watkins Uiberall PLLC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120  
Purpose of Expenditure: Accounting  
Amount of Expenditure: \$ \$2,300.00 Date of Expenditure: \$ 2/20/2024

Business or Organization Name: Watkins Uiberall PLLC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120  
Purpose of Expenditure: Accounting  
Amount of Expenditure: \$ \$750.00 Date of Expenditure: \$ 6/6/2024

Business or Organization Name: Pinnacle Bank **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 949 Shady Grove Rd City: Memphis State: TN Zip Code: 38119  
Purpose of Expenditure: Bank Fee  
Amount of Expenditure: \$ \$80.00 Date of Expenditure: \$ 2/6/2024

Business or Organization Name: Pinnacle Bank **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 949 Shady Grove Rd City: Memphis State: TN Zip Code: 38119  
Purpose of Expenditure: Bank Fee  
Amount of Expenditure: \$ \$80.00 Date of Expenditure: \$ 3/5/2024

Business or Organization Name: Pinnacle Bank **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 949 Shady Grove Rd City: Memphis State: TN Zip Code: 38119  
Purpose of Expenditure: Bank Fee  
Amount of Expenditure: \$ \$80.00 Date of Expenditure: \$ 4/5/2024

Total Expenditures: \$ \$3,290.00

(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.)

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,290.00

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: Pinnacle Bank **OR**

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

Address: 949 Shady Grove Rd City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Bank Fee

Amount of Expenditure: \$ \$80.00 Date of Expenditure: \$ 5/6/2024

Business or Organization Name: Pinnacle Bank **OR**

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

Address: 949 Shady Grove Rd City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Bank Fee

Amount of Expenditure: \$ \$80.00 Date of Expenditure: \$ 6/5/2024

Business or Organization Name: Public Service Partners **OR**

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

Address: 505 Pryor Street SW City: Memphis State: TN Zip Code: 38127

Purpose of Expenditure: Campaign Fundraising

Amount of Expenditure: \$ \$1,588.20 Date of Expenditure: \$ 2/11/2024

Business or Organization Name: Committee to Elect Tami Sawyer **OR**

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

Address: PO Box 40789 City: Memphis State: TN Zip Code: 38174

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 2/9/2024

Business or Organization Name: MailChimp **OR**

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

Address: 675 Ponce De Leon Ave NE Ste 5 City: Atlanta State: GA Zip Code: 30308

Purpose of Expenditure: Email Services

Amount of Expenditure: \$ \$197.55 Date of Expenditure: \$ 2/5/2024

Total Expenditures: \$ \$6,235.75

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$6,235.75

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: MailChimp **OR**

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

Address: 675 Ponce De Leon Ave NE Ste 5 City: Atlanta State: GA Zip Code: 30308

Purpose of Expenditure: Email Services

Amount of Expenditure: \$ \$197.55 Date of Expenditure: \$ 3/4/2024

Business or Organization Name: MailChimp **OR**

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

Address: 675 Ponce De Leon Ave NE Ste 5 City: Atlanta State: GA Zip Code: 30308

Purpose of Expenditure: Email Services

Amount of Expenditure: \$ \$197.55 Date of Expenditure: \$ 4/4/2024

Business or Organization Name: MailChimp **OR**

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

Address: 675 Ponce De Leon Ave NE Ste 5 City: Atlanta State: GA Zip Code: 30308

Purpose of Expenditure: Email Services

Amount of Expenditure: \$ \$197.55 Date of Expenditure: \$ 5/6/2024

Business or Organization Name: MailChimp **OR**

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

Address: 675 Ponce De Leon Ave NE Ste 5 City: Atlanta State: GA Zip Code: 30308

Purpose of Expenditure: Email Services

Amount of Expenditure: \$ \$197.55 Date of Expenditure: \$ 6/4/2024

Business or Organization Name: NGP Van Inc **OR**

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

Address: 655 15th St NW Ste 650 City: Washington State: DC Zip Code: 02005

Purpose of Expenditure: Fundraising

Amount of Expenditure: \$ \$949.35 Date of Expenditure: \$ 3/1/2024

Total Expenditures: \$ \$7,975.30

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$7,975.30

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: NGP Van Inc **OR**

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

Address: 655 15th St NW Ste 650 City: Washington State: DC Zip Code: 02005

Purpose of Expenditure: Fundraising

Amount of Expenditure: \$ \$949.35 Date of Expenditure: \$ 5/3/2024

Business or Organization Name: NGP Van Inc **OR**

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

Address: 655 15th St NW Ste 650 City: Washington State: DC Zip Code: 02005

Purpose of Expenditure: Fundraising

Amount of Expenditure: \$ \$949.35 Date of Expenditure: \$ 5/17/2024

Business or Organization Name: NGP Van Inc **OR**

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

Address: 655 15th St NW Ste 650 City: Washington State: DC Zip Code: 02005

Purpose of Expenditure: Fundraising

Amount of Expenditure: \$ \$949.35 Date of Expenditure: \$ 6/7/2024

Business or Organization Name: Live From Memphis **OR**

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

Address: 904 New York Street City: Memphis State: TN Zip Code: 38104

Purpose of Expenditure: Media

Amount of Expenditure: \$ \$1,600.00 Date of Expenditure: \$ 2/6/2024

Business or Organization Name: Fortify Communications LLC **OR**

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

Address: PO Box 742 City: Nashville State: TN Zip Code: 37206

Purpose of Expenditure: Printing

Amount of Expenditure: \$ \$2,342.51 Date of Expenditure: \$ 2/15/2024

Total Expenditures: \$ \$14,765.86

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$14,765.86

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: PayPal **OR**

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

Address: 2211 N First St City: San Jose State: CA Zip Code: 95131

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$0.83 Date of Expenditure: \$ 1/16/2024

Business or Organization Name: PayPal **OR**

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

Address: 2211 N First St City: San Jose State: CA Zip Code: 95131

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$0.83 Date of Expenditure: \$ 2/15/2024

Business or Organization Name: PayPal **OR**

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

Address: 2211 N First St City: San Jose State: CA Zip Code: 95131

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$0.83 Date of Expenditure: \$ 3/15/2024

Business or Organization Name: Paragon Solution **OR**

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

Address: 2141 E Broadway Rd Ste 202 City: Tempe State: AZ Zip Code: 85285

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$32.00 Date of Expenditure: \$ 2/2/2024

Business or Organization Name: Paragon Solution **OR**

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

Address: 2141 E Broadway Rd Ste 202 City: Tempe State: AZ Zip Code: 85285

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 3/8/2024

Total Expenditures: \$ \$14,825.35

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$14,825.35

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: Paragon Solution **OR**

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

Address: 2141 E Broadway Rd Ste 202 City: Tempe State: AZ Zip Code: 85285

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 4/8/2024

Business or Organization Name: Paragon Solution **OR**

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

Address: 2141 E Broadway Rd Ste 202 City: Tempe State: AZ Zip Code: 85285

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 5/2/2024

Business or Organization Name: Paragon Solution **OR**

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

Address: 2141 E Broadway Rd Ste 202 City: Tempe State: AZ Zip Code: 85285

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 6/3/2024

Business or Organization Name: The Links Foundation Inc **OR**

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

Address: PO Box 4386 City: Memphis State: TN Zip Code: 38121

Purpose of Expenditure: Sponsorship

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 3/21/2024

Business or Organization Name: Public Storage **OR**

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

Address: 4910 Poplar Ave City: Memphis State: TN Zip Code: 38117

Purpose of Expenditure: Storage

Amount of Expenditure: \$ \$86.00 Date of Expenditure: \$ 2/5/2024

Total Expenditures: \$ \$15,486.35

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$15,486.35

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: Public Storage **OR**

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

Address: 4910 Poplar Ave City: Memphis State: TN Zip Code: 38117

Purpose of Expenditure: Storage

Amount of Expenditure: \$ \$86.00 Date of Expenditure: \$ 3/4/2024

Business or Organization Name: Public Storage **OR**

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

Address: 4910 Poplar Ave City: Memphis State: TN Zip Code: 38117

Purpose of Expenditure: Storage

Amount of Expenditure: \$ \$86.00 Date of Expenditure: \$ 4/3/2024

Business or Organization Name: Public Storage **OR**

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

Address: 4910 Poplar Ave City: Memphis State: TN Zip Code: 38117

Purpose of Expenditure: Storage

Amount of Expenditure: \$ \$113.00 Date of Expenditure: \$ 5/3/2024

Business or Organization Name: Public Storage **OR**

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

Address: 4910 Poplar Ave City: Memphis State: TN Zip Code: 38117

Purpose of Expenditure: Storage

Amount of Expenditure: \$ \$113.00 Date of Expenditure: \$ 6/3/2024

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: Anita Middle Name: \_\_\_\_\_ Last Name: Woods

Address: 5970 Barrentine Dr City: Bartlett State: TN Zip Code: 38134

Purpose of Expenditure: Food and Beverage Refund

Amount of Expenditure: \$ (\$1,652.00) Date of Expenditure: \$ 2/16/2024

Total Expenditures: \$ \$14,232.35

(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: Paul Young
2. Reporting Period: Start Date: 1/16/2024 End Date: 6/30/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$14,232.35

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: Hattiloo Theatre **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 37 South Cooper Street City: Memphis State: TN Zip Code: 38104  
Purpose of Expenditure: Venue Rental Refund  
Amount of Expenditure: \$ (\$375.00) Date of Expenditure: \$ 2/16/2024

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

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: \$ \$13,857.35

(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.)