



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. Date: 7/14/2023      2.a. Candidate or Committee Name: Manjit Kaur

2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: 11/8/2023

4. Campaign Address: 1661 Aaron Brenner Dr Ste 300  
 City: Memphis      State: TN      Zip Code: 38120      Phone: (901) 761-2720

5. Candidate Home Address: 3075 Devonshire Way  
 City: Germantown      State: TN      Zip Code: 38139      Phone: (617) 270-7738  
 Candidate Email Address: manjitforgermantown@gmail.com

6. Office Sought: (include district number, if applicable) Germantown Alderman, Pos. 1

7. Name of Political Treasurer (may be candidate): Angela Correale  
 Political Treasurer Email Address: acorreale22@gmail.com

8. Category or Report: (check one)  
 First Quarter     Second Quarter     Third Quarter     Fourth Quarter     Pre-Primary     Pre-General  
 Mid-Year Supplemental     Year-End Supplemental

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

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	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report .....	\$ <u>\$21,598.37</u>
b. Total Receipts This Period .....	\$ <u>\$0.00</u>
c. Total Disbursements This Period .....	\$ <u>\$2,978.34</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$ <u>\$18,620.03</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: Manjit Kaur

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

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

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$2,978.34  
(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.)..... \$ \$2,978.34

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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Manjit Kaur
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) \$ \$0.00

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: \$ \$1,000.00 Date of Expenditure: \$ 1/17/2023

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: \$ \$500.00 Date of Expenditure: \$ 2/16/2023

Business or Organization Name: Mid South Siki Sabha **OR**

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

Address: 1755 Appling Rd City: Cordova State: TN Zip Code: 38016

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$101.00 Date of Expenditure: \$ 6/29/2023

Business or Organization Name: Alpha Omega Veteran Ball **OR**

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

Address: 1183 Madison Ave City: Memphis State: TN Zip Code: 38104

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$273.04 Date of Expenditure: \$ 6/29/2023

Business or Organization Name: Republican Women of Purpose **OR**

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

Address: 3325 Club at Southwind City: Memphis State: TN Zip Code: 38125

Purpose of Expenditure: Dues

Amount of Expenditure: \$ \$70.00 Date of Expenditure: \$ 1/17/2023

Total Expenditures: \$ \$1,944.04

(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: Manjit Kaur
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) \$ \$1,944.04

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: Republican Women of Purpose **OR**

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

Address: 3325 Club at Southwind City: Memphis State: TN Zip Code: 38125

Purpose of Expenditure: Dues

Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 6/29/2023

Business or Organization Name: Embassy Suites **OR**

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

Address: 1393 S Eads St City: Arlington State: VA Zip Code: 22202

Purpose of Expenditure: Travel

Amount of Expenditure: \$ \$884.30 Date of Expenditure: \$ 6/29/2023

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: \$ \$2,978.34

(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.)