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RECEIVED OCT 20 2024 CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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For State and Local Candidates
For Single-Candidate Committees

1. Date: 10.10-24 2.a. Candidate or Committee Name: Committee to Elect Lisa Arnold
2.b. If Committee, Name of Candidate: Lisa Arnold 3. Election Date: 8-1-2024
4. Campaign Address: 4544 Given Ave
City: Memphis State: TN Zip Code: 38122 Phone: 901-832-5472
5. Candidate Home Address: Same
City: _____ State: _____ Zip Code: _____ Phone: _____
Candidate Email Address: _____
6. Office Sought: (include district number, if applicable) General Sessions Court Clerk
7. Name of Political Treasurer (may be candidate): Lisa Wimberly
Political Treasurer Email Address: LWimberly6432@att.net

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: 7-1-24 End Date: 9-30-24

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.

Lisa Arnold 10-10-24
Candidate Signature Date

Lisa Wimberly 10-10-24
Political Treasurer Signature Date

Shirley Whyte 10-10-24
Witness Signature Date

Kinda Nico Gair 10-10-24
Witness Signature Date

12. Summary:

a. Balance On Hand Last Report.....	\$	<u>36,479.90</u>
b. Total Receipts This Period.....	\$	<u>13,390.00</u>
c. Total Disbursements This Period.....	\$	<u>49,857.23</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.).....	\$	<u>12.63</u>
e. Total Loans Outstanding.....	\$	<u>-0-</u>
f. Total Obligations Outstanding.....	\$	<u>500.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Lisa Arnold

14. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 2,140.00
(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) \$ 11,250.00
- c. Loans Received This Reporting Period \$ - 0 -
- d. Interest Received This Reporting Period \$ 9.33
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 13,390.00

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 49,857.23
(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.) \$

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ - 0 -
- b. Itemized In-Kind Contributions Received This Period \$ 3000.00
- c. Total In-Kind Contributions Received This Period \$ 3000.00

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 500.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Lisa Arnold
2. Reporting Period: Start Date: 7-1-2024 End Date: 9-30-2024
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: See Attached 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: \$ 3800.00

(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.)

?

Name	Address	City	St	Zip	Amount	Date
Mphs Police Assoc	638 Jefferson	Memphis	Tn	38105	1000.00	07/12/24
Darral/Cherrel	9634 Putter	Lakeland	Tn	38002	100.00	07/15/24
Joseph	1075 Timberlake Dr	Cordova	Tn	38018	100.00	07/12/24
Medford Roofing	3667 Summer Ave	Memphis	Tn	38112	500.00	07/18/24
Brooke	409 River Oaks Rd	Memphis	Tn	38120	1800.00	07/19/24
Harold/Tracy	7250 Penbrook Cv	Germentown	Tn	38138	100.00	07/24/24
Charles	5991 Elmore Rd	Bartlett	Tn	38134	200.00	07/25/24

T. 3800.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Lisa Arnold
2. Reporting Period: Start Date: 7-1-2024 End Date: 9-30-2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: See Report 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: \$ 6,340.00

(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.)

Contribution

First Name	Last Name	Pay	Rec	Contribution	Fee	Ref	Amount	Date Received
Timothy A	Beacham	card	Yes	\$100.00	\$5.15		USD	9/6/2024 21:53
Timothy A	Beacham	card	Yes	\$150.00	\$7.59		USD	8/29/2024 16:17
Timothy A	Beacham	card	Yes	\$100.00	\$0.00		USD	8/6/2024 21:59
Randall	Hendon	card	No	\$40.00	\$2.21		USD	7/30/2024 20:16
Karen	Lane	card	No	\$250.00	\$20.49		USD	7/30/2024 19:59
Kathi	Williams	card	No	\$100.00	\$5.15		USD	7/30/2024 9:09
Timothy A	Beacham	card	Yes	\$150.00	\$7.59		USD	7/29/2024 16:12
Joan	Thomas	card	No	\$250.00	\$12.50		USD	7/27/2024 15:42
Barbara	Trautman	card	No	\$100.00	\$5.15		USD	7/26/2024 8:50
Farrar	Vaughan	card	No	\$500.00	\$24.75		USD	7/26/2024 8:17
Richard	Sullivan	card	No	\$250.00	\$12.50		USD	7/22/2024 22:10
Jason	Buchanan	card	No	\$250.00	\$12.50		USD	7/22/2024 16:17
Bonita	Lyons	card	No	\$150.00	\$7.60		USD	7/22/2024 15:47
P	Sorce	card	No	\$100.00	\$5.15		USD	7/22/2024 10:36
Keith	Yarmowich	card	No	\$50.00	\$2.70		USD	7/20/2024 16:33
Gene	Holcomb	card	No	\$100.00	\$5.15		USD	7/20/2024 0:05
Max and Carol	Williams	card	No	\$100.00	\$5.15		USD	7/19/2024 21:34
Chris	Lareau	card	No	\$50.00	\$2.70		USD	7/19/2024 18:29
Barbara	Trautman	card	No	\$100.00	\$5.15		USD	7/19/2024 16:11
Kristin	Hicks	card	No	\$25.00	\$1.47		USD	7/19/2024 15:12
Kimberly	Eggett	card	No	\$50.00	\$2.70		USD	7/19/2024 15:04
Brent	Taylor	card	No	\$1,000.00	\$49.25		USD	7/19/2024 14:07
Theresa	Hargrove	card	No	\$25.00	\$1.47		USD	7/19/2024 13:45
Bruce C	Taylor	card	No	\$500.00	\$24.75		USD	7/19/2024 12:32
Brad	Reedy	card	No	\$500.00	\$24.75		USD	7/19/2024 12:03
Peter	Wofford	card	No	\$50.00	\$2.70		USD	7/19/2024 11:39
Maureen	Fraser	card	No	\$250.00	\$12.50		USD	7/18/2024 18:18
Michael	Warr	card	No	\$1,000.00	\$49.25		USD	7/18/2024 16:11
David	Ruff	card	No	\$50.00	\$2.70		USD	7/18/2024 14:35

\$ 6340.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Lisa Arnold
2. Reporting Period: Start Date: 7.1.2024 End Date: 9.30.2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 10,140.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: See Attached 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: \$ 3050.00

(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.)

James	Fields	card	No	\$100.00	\$5.15	USD	7/17/2024 19:37
Eddie	Shaw	card	No	\$100.00	\$5.15	USD	7/17/2024 14:54
Frances	Bloodworth	card	No	\$250.00	\$12.50	USD	7/16/2024 22:07
Stephen	Leffler	card	No	\$250.00	\$12.50	USD	7/14/2024 14:12
Carter	Hord	card	No	\$100.00	\$5.15	USD	7/13/2024 18:20
Jeffrey	Mollerup	card	No	\$25.00	\$1.47	USD	7/13/2024 18:04
Charles	Slatery	card	No	\$500.00	\$24.75	USD	7/12/2024 8:58
Ray	Brammer	card	No	\$25.00	\$1.47	USD	7/11/2024 17:33
Stuart	Maxwell	card	No	\$100.00	\$5.15	USD	7/11/2024 16:02
Bruce	Feldbaum	card	No	\$100.00	\$5.15	USD	7/11/2024 13:27
Clifton	Phillips	card	No	\$250.00	\$12.50	USD	7/11/2024 13:07
Mary	Ellis	card	No	\$250.00	\$12.50	USD	7/10/2024 18:01
Linda	Mallory	card	No	\$300.00	\$14.95	USD	7/10/2024 13:17
Ben	Adams	card	No	\$200.00	\$10.05	USD	7/9/2024 20:56
Bill	Gibbons	card	No	\$50.00	\$2.70	USD	7/9/2024 17:27
Patrick	Demere	card	No	\$100.00	\$5.15	USD	7/9/2024 11:26
Hal	Fogelman	card	No	\$350.00	\$17.39	USD	7/9/2024 11:26

\$ 3050.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Committee to Elect Lisa Arnold
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 13,190.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Miscellaneous Cash 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: \$ 200.00 Date of Contribution: 7-30-24 Aggregate This Election: \$ 200.00

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: \$ _____

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: \$ 200.00
(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Lisa Arnold
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
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: _____ OR
First Name: Robert Middle Name: m. Last Name: Arnold
Address: 3604 Broadway City: Bartlett State: In Zip Code: 38133
Purpose of Expenditure: Sign Supplies
Amount of Expenditure: \$ 645.19 Date of Expenditure: 7-16-2024

Business or Organization Name: West Rogers Strategic Communications OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8572 Island City: Memphis State: In Zip Code: 38125
Purpose of Expenditure: TV Commercials
Amount of Expenditure: \$ 4,999.00 Date of Expenditure: 7-29-2024

Business or Organization Name: West Rogers Strategic Communications OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8572 Island City: Memphis State: In Zip Code: 38125
Purpose of Expenditure: TV Commercials
Amount of Expenditure: \$ 3,021.00 Date of Expenditure: 7-29-2024

Business or Organization Name: West Rogers Strategic Communications OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8572 Island City: Memphis State: In Zip Code: 38125
Purpose of Expenditure: Broadcast & TV Ads
Amount of Expenditure: \$ 22,274.00 Date of Expenditure: 7-29-2024

Business or Organization Name: West Rogers Strategic Communications OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8572 Island City: Memphis State: In Zip Code: 38125
Purpose of Expenditure: Cable Ads
Amount of Expenditure: \$ 10,007.00 Date of Expenditure: 7-1-2024

Total Expenditures: \$ 40,946.19

(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: Lisa Arnold
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 40,946.19

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: Margin of Victory OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 196 City: Collierville State: In Zip Code: 38017
Purpose of Expenditure: TV Ad Production
Amount of Expenditure: \$ 2806.00 Date of Expenditure: 7-20-2024

Business or Organization Name: Raise the Money OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Bank Fees
Amount of Expenditure: \$ 362.66 Date of Expenditure: 9-30-24

Business or Organization Name: Old Whitten Tavern OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2465 Whitten Rd City: Memphis State: In Zip Code: 38133
Purpose of Expenditure: Watch Night Facility
Amount of Expenditure: \$ 700.65 Date of Expenditure: 8-5-24

Business or Organization Name: Margin of Victory OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 196 City: Collierville State: In Zip Code: 38017
Purpose of Expenditure: Bill Board Design / Graphics
Amount of Expenditure: \$ 2806.00 Date of Expenditure: 7-20-24

Business or Organization Name: Perry Strategic's OR
First Name: Kim Middle Name: _____ Last Name: Perry
Address: 1797 Lisson Cove City: Collierville State: TN Zip Code: 38017
Purpose of Expenditure: Commission May
Amount of Expenditure: \$ 968.25 Date of Expenditure: 6-11-24

Total Expenditures: \$ 7643.56
(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: Lisa Arnold
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 48,589.75

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: Perry Strategies OR
First Name: Kim Middle Name: _____ Last Name: Perry
Address: 1797 Lesson Cove City: Collierville State: In Zip Code: 38017
Purpose of Expenditure: Colletta's 1 mail Chinap
Amount of Expenditure: \$ 767.48 Date of Expenditure: 7-12-2024

Business or Organization Name: Republican Women of Purpose OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Republican Women of Purpose Dinner (Red White Blue
Amount of Expenditure: \$ 500.00 Date of Expenditure: 8-5-2024 2Amen

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: \$ 1267.48

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Lisa Arnold
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
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: Grezevant Enterprises Inc OR
First Name: Jrip Middle Name: _____ Last Name: Grezevant
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 1500.00 In-Kind Contribution Date: _____ Aggregate This Election: \$ 1500.00
Description of In-Kind Contribution: Bill Boards

Business or Organization Name: Grezevant Enterprises Inc OR
First Name: Jrip Middle Name: _____ Last Name: Grezevant
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 1500.00 In-Kind Contribution Date: _____ Aggregate This Election: \$ 1500.00
Description of In-Kind Contribution: Bill Boards

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: \$ 3,000.00

(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.)