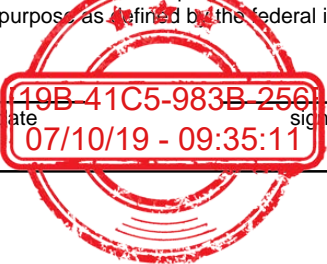


# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. DATE OF REPORT <b>7/10/2019</b>		2.a. NAME OF CANDIDATE OR COMMITTEE <b>Rhonda Logan</b>					
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE <b>2019-10-03</b>				
4.a. CAMPAIGN ADDRESS AND PHONE							
Street or Rural Route	City	State	Zip Code	Phone			
<b>6025 STAGE RD / SUITE 42-405</b>	<b>MEMPHIS</b>	<b>TN</b>	<b>38128</b>	<b>(901) 363-1544</b>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)							
Street or Rural Route	City	State	Zip Code	Phone			
<b>6025 STAGE RD / SUITE 42-405</b>	<b>MEMPHIS</b>	<b>TN</b>	<b>38128</b>	<b>(901) 363-1544</b>			
5. OFFICE SOUGHT (include district number, if applicable) <b>Memphis City Council, Dist. 1</b>			6. NAME OF POLITICAL TREASURER (may be candidate) <b>JAMES WRIGHT CPA</b>				
7. CATEGORY OR REPORT (Check one)							
<input type="checkbox"/> FIRST QUARTER	<input checked="" type="checkbox"/> SECOND QUARTER	<input type="checkbox"/> THIRD QUARTER	<input type="checkbox"/> FOURTH QUARTER	<input type="checkbox"/> PRE-PRIMARY	<input type="checkbox"/> PRE-GENERAL	<input type="checkbox"/> MID-YEAR SUPPLEMENTAL	<input type="checkbox"/> YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD <b>2019-04-01</b>			8.b. ENDING DATE OF REPORTING PERIOD <b>2019-06-30</b>				
9. (Check one)							
a. <input type="checkbox"/> 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. <input checked="" type="checkbox"/> 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		_____ signature of political treasurer		_____ date	
							
11. WITNESS SIGNATURE							
_____ signature of witness		_____ date		_____ signature of witness		_____ date	
12. SUMMARY							
a. BALANCE ON HAND LAST REPORT .....						\$ <u>0.00</u>	
b. TOTAL RECEIPTS THIS PERIOD .....						\$ <u>7,504.47</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD .....						\$ <u>6,089.53</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....						\$ <u>1,414.94</u>	
e. TOTAL LOANS OUTSTANDING .....						\$ <u>2,547.58</u>	
f. TOTAL OBLIGATIONS OUTSTANDING .....						\$ <u>0.00</u>	





# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Rhonda Logan</b>			2. REPORT COVERING THE PERIOD FROM: 2019-04-01 TO: 2019-06-30		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$0.00</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>ANTHONY</b>		Middle Name		Contribution Received For:  <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input checked="" type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution  <b>\$200.00</b>
Last Name/Organization Name <b>TATE</b>					
Address <b>335 JAMERSON FARM COVE</b>					
City <b>COLLIERVILLE</b>		State <b>TN</b>	Zip Code <b>38017</b>	Date of Contribution  <b>2019-06-22</b>	Aggregate This Election  <b>\$200.00</b>
Occupation <b>BUSINESS OWNER</b>					
Employer <b>N/A</b>					
First Name <b>SAMMIE</b>		Middle Name		Contribution Received For:  <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input checked="" type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution  <b>\$1,000.00</b>
Last Name/Organization Name <b>HOLLOWAY</b>					
Address <b>7331 OLD BROWNSVILLE</b>					
City <b>ARLINGTON</b>		State <b>TN</b>	Zip Code <b>38002</b>	Date of Contribution  <b>2019-05-09</b>	Aggregate This Election  <b>\$1,000.00</b>
Occupation <b>PASTOR</b>					
Employer <b>N/A</b>					
First Name <b>RITA</b>		Middle Name <b>H</b>		Contribution Received For:  <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input checked="" type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution  <b>\$200.00</b>
Last Name/Organization Name <b>PORTER</b>					
Address <b>P.O. BOX 27623</b>					
City <b>MEMPHIS</b>		State <b>TN</b>	Zip Code <b>38167</b>	Date of Contribution  <b>2019-05-09</b>	Aggregate This Election  <b>\$200.00</b>
Occupation <b>RETIRED</b>					
Employer <b>N/A</b>					
First Name <b>WILLIE</b>		Middle Name		Contribution Received For:  <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input checked="" type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution  <b>\$250.00</b>
Last Name/Organization Name <b>BOOKER</b>					
Address <b>3407 HOCKER HEDGE COVE</b>					
City <b>MEMPHIS</b>		State <b>TN</b>	Zip Code <b>38128</b>	Date of Contribution  <b>2019-05-09</b>	Aggregate This Election  <b>\$250.00</b>
Occupation <b>BUSINESS OWNER</b>					
Employer <b>N/A</b>					
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.)					<b>\$1,650.00</b>



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Rhonda Logan</b>			2. REPORT COVERING THE PERIOD FROM: 2019-04-01 TO: 2019-06-30	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$0.00</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name <b>NICOLE</b>	Middle Name	Purpose of Expenditure <b>CAMPAIGN WORKER</b>		Amount of Expenditure  <b>\$1,000.00</b>
Last Name/Business Name <b>GARNER</b>				
Address <b>123 FOUR ST</b>				
City <b>MEMPHIS</b>	State <b>TN</b>	Zip Code <b>38128</b>		
First Name <b>LEXIE</b>	Middle Name	Purpose of Expenditure <b>CAMPAIGN ADS</b>		Amount of Expenditure  <b>\$250.00</b>
Last Name/Business Name <b>CARTER</b>				
Address <b>125 FOUR ST</b>				
City <b>MEMPHIS</b>	State <b>TN</b>	Zip Code <b>38128</b>		
First Name	Middle Name	Purpose of Expenditure <b>MATERIALS &amp; SUPPLIES</b>		Amount of Expenditure  <b>\$2,091.17</b>
Last Name/Business Name <b>A-1 PRINTING</b>				
Address <b>126 FOUR ST</b>				
City <b>MEMPHIS</b>	State <b>TN</b>	Zip Code <b>38128</b>		
First Name	Middle Name	Purpose of Expenditure <b>SIGN MATERIALS</b>		Amount of Expenditure  <b>\$104.81</b>
Last Name/Business Name <b>HOME DEPOT</b>				
Address <b>4950 STAGE RD</b>				
City <b>MEMPHIS</b>	State <b>TN</b>	Zip Code <b>38128</b>		
First Name	Middle Name	Purpose of Expenditure <b>BANNERS AND STANDS</b>		Amount of Expenditure  <b>\$382.37</b>
Last Name/Business Name <b>RESOURCE MEDIA GROUP</b>				
Address <b>1916 VANDERHORN DR.</b>				
City <b>MEMPHIS</b>	State <b>TN</b>	Zip Code <b>38134</b>		
First Name	Middle Name	Purpose of Expenditure <b>FOOD AND BEVERAGES</b>		Amount of Expenditure  <b>\$109.21</b>
Last Name/Business Name <b>SAMS CLUB</b>				
Address <b>2150 COVINGTON PIKE</b>				
City <b>MEMPHIS</b>	State <b>TN</b>	Zip Code <b>38128</b>		
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.)				<b>\$3,937.56</b>



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Rhonda Logan</b>			2. REPORT COVERING THE PERIOD FROM: 2019-04-01 TO: 2019-06-30	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$0.00</b>
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 <b>REGENCY OF TN</b>		<b>STORAGE</b>		<b>\$256.00</b>
Address <b>4271 NEW RALEIGH-LAGRANGE RD.</b>				
City <b>MEMPHIS</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>PERIGNONS REST</b>		<b>CAMPAIGN EVENT</b>		<b>\$300.00</b>
Address <b>1218 COLEMAN RD.</b>				
City <b>MEMPHIS</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>EMERGE OF TN</b>		<b>CAMPAIGN TRAINING</b>		<b>\$500.00</b>
Address <b>406 FIRST ST SE</b>				
City <b>WASHINGTON</b>	State <b>DC</b>			
First Name <b>KATRINA</b>	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>JOHNSON</b>		<b>CAMPAIGN WORKER</b>		<b>\$500.00</b>
Address <b>2019 AUSTIN PEAY</b>				
City <b>MEMPHIS</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>AMAZON</b>		<b>TABLE CLOTHS FOR CAMPAIGN EVENT</b>		<b>\$152.80</b>
Address <b>3292 E HOLMES RD</b>				
City <b>MEMPHIS</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>ALPHA PHASE</b>		<b>T-SHIRTS</b>		<b>\$224.00</b>
Address <b>7700 EAST PARKWAY</b>				
City <b>LA VISTA</b>	State <b>NE</b>			
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.)				<b>\$1,932.80</b>



# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD				
Rhonda Logan				FROM:		TO:		
				2019-04-01		2019-06-30		
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)	
RHONDA				\$0.00	\$2,547.58	\$0.00	\$2,547.58	
Last Name/Organization Name				\$0.00	\$2,547.58	\$0.00	\$2,547.58	
LOGAN								
Address				Loan Received For:		Date of Loan		
4971 RIDGE PARK DR.				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		2019-06-17		
City		State	Zip Code		<input checked="" type="checkbox"/> Runoff (Local Elections Only)			
MEMPHIS		TN	38128					
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	Zip Code
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	Zip Code
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	Zip Code
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	Zip Code
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	Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding				
<b>4. Totals for all Loans (complete on last page of itemized loans)</b>				Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
(Total loans received should also be shown in item 16. on summary page.) (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.)				\$0.00	\$2,547.58	\$0.00	\$2,547.58	

