



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

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

1. Date: 7/10/2024 2.a. Candidate or Committee Name: Althea Greene for School Board
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/1/2024
4. Campaign Address: 924 Hawthorne St.
City: Memphis State: TN Zip Code: 38107 Phone: 901.233.5082
5. Candidate Home Address: 924 Hawthorne St.
City: Memphis State: TN Zip Code: 38107 Phone: 901.233.5082
Candidate Email Address: altheagreen@yahoo.com
6. Office Sought: (include district number, if applicable) School Board District 2
7. Name of Political Treasurer (may be candidate): Brian Malone
Political Treasurer Email Address: brianmalone901@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: 04/01/2024 End Date: 06/30/2024
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

Political Treasurer Signature

Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

- a. Balance On Hand Last Report \$ 0
- b. Total Receipts This Period \$ 29,205
- c. Total Disbursements This Period \$ 15,121.01
- d. Balance On Hand (12.a. plus 12.b. minus 12.c.) \$ 14,083.99
- e. Total Loans Outstanding \$ 0
- f. Total Obligations Outstanding \$ 0

SUMMARY PAGE - CANDIDATE

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

13. Name of Candidate or Committee: Althea Greene for School Board Dist. 2

14. Reporting Period: Start Date: 04/01/24 End Date: 06/30/24

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) \$ 29,205
- 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.) \$ 29,205

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 14,083.99
(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.) \$ 14,083.99

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ \$150.00
- b. Itemized In-Kind Contributions Received This Period \$ 0
- c. Total In-Kind Contributions Received This Period \$ \$150.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

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

1. Candidate or Committee Name: Althea Greene for School Board Dist. 2
2. Reporting Period: Start Date: 04/01/2024 End Date: 06/30/2024
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: Political Action Committee for Education OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 411 Monroe City: Memphis State: TN Zip Code: 38103

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 6/26/24 Aggregate This Election: \$ \$1,000

Business or Organization Name: Katherine C. Warren OR

First Name: Katherine Middle Name: C. Last Name: Warren

Address: 215 Buena Vista Place City: Memphis State: TN Zip Code: 38112

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 6/8/2024 Aggregate This Election: \$ 1,000.00

Business or Organization Name: _____ OR

First Name: LaShunda Middle Name: _____ Last Name: Bond

Address: 4501 Potters Cross Dr. City: Memphis State: TN Zip Code: 38125

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 1,250.00 Date of Contribution: 05/06/24 Aggregate This Election: \$ \$1,250.00

Business or Organization Name: _____ OR

First Name: Janelle Middle Name: _____ Last Name: Burns

Address: 614 Rocky Point Rd. City: Cordova State: TN Zip Code: 38018

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 1,250.00 Date of Contribution: 5/6/24 Aggregate This Election: \$ 1,250.00

Total Contributions: \$ 4,500.00

(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

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1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Fifer & Associates **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1441 S. Perkins Road City: Memphis State: TN Zip Code: 38117
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.00 Date of Contribution: 4/22/2024 Aggregate This Election: \$ 1,000.00

Business or Organization Name: G & J Contractors **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 6855 Raleigh LaGrange City: Memphis State: TN Zip Code: 38134
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.00 Date of Contribution: 4/24/24 Aggregate This Election: \$ 1,000.00

Business or Organization Name: The Redwing Group **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1717 Riverside Dr. #910 City: Memphis State: TN Zip Code: 38103
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.00 Date of Contribution: 5/3/2024 Aggregate This Election: \$ 1,000.00

Business or Organization Name: _____ **OR**
First Name: Marcus Middle Name: _____ Last Name: Lewis
Address: 40 S. Main St #2150 City: Memphis State: TN Zip Code: 38103
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.00 Date of Contribution: 5/6/2024 Aggregate This Election: \$ 1,000.00

Total Contributions: \$ 8,500.00

(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

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NOT TO BE REPRODUCED OR COPIED WITHOUT BE
ACCEPTED TCA 2-5-102

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
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: Jack Middle Name: G Last Name: Knight
 Address: 1596 Boland Place City: Memphis State: TN Zip Code: 38104
 Occupation: _____ Employer: _____
 Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
 Amount of Contribution: \$ 1,000.00 Date of Contribution: 5/3/24 Aggregate This Election: \$ 1,000.00

Business or Organization Name: Nickson General Contractors OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 3686 Summer Ave. City: Memphis State: TN Zip Code: 38122
 Occupation: _____ Employer: _____
 Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
 Amount of Contribution: \$ 1,000.00 Date of Contribution: 5/1/2024 Aggregate This Election: \$ 1,000.00

Business or Organization Name: _____ OR
 First Name: Frank Middle Name: C Last Name: Kessler
 Address: 5116 Purnell City: Memphis State: TN Zip Code: 38826
 Occupation: _____ Employer: _____
 Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
 Amount of Contribution: \$ 1,000.00 Date of Contribution: 4/22/24 Aggregate This Election: \$ 1,000.00

Business or Organization Name: _____ OR
 First Name: C Middle Name: L Last Name: Ewing
 Address: 1290 Dubray Manor Cove City: Collierville State: TN Zip Code: 38017
 Occupation: _____ Employer: _____
 Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
 Amount of Contribution: \$ 1,000.00 Date of Contribution: 4/22/24 Aggregate This Election: \$ 1,000.00

Total Contributions: \$ 12,500.00

(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

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1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
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: Cyrus Middle Name: _____ Last Name: Booker
Address: 366 Laurel Falls Cove City: Memphis State: TN Zip Code: 38028
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.00 Date of Contribution: 4/22/24 Aggregate This Election: \$ 1,000.00

Business or Organization Name: _____ OR
First Name: Willie Middle Name: _____ Last Name: Frazier
Address: 2327 Lovitt Dr. City: Memphis State: TN Zip Code: 38119
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.00 Date of Contribution: 4/22/24 Aggregate This Election: \$ 1,000.00

Business or Organization Name: _____ OR
First Name: Winston Middle Name: _____ Last Name: Gipson
Address: 3844 Planters View Dr. City: Memphis State: TN Zip Code: 38133
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.00 Date of Contribution: 4/22/24 Aggregate This Election: \$ 1,000.00

Business or Organization Name: _____ OR
First Name: Althea Middle Name: E. Last Name: Greene
Address: 924 Hawthorne City: Memphis State: TN Zip Code: 38107
Occupation: Retired Educator Employer: N/A
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 5/4/2024 Aggregate This Election: \$ 500.00

Total Contributions: \$ 16,000.00

(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.)

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1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
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: Mary Middle Name: Tate Last Name: Lee
Address: 262 Beckham Dr. City: Collierville State: TN Zip Code: 38017
Occupation: Retired Employer: N/A
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 5/6/24 Aggregate This Election: \$ 500.00

Business or Organization Name: _____ **OR**
First Name: LaKesa Middle Name: _____ Last Name: Greene
Address: 2138 Albany City: Memphis State: TN Zip Code: 38108
Occupation: Supervisor Employer: Real Life Ministries
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 05/4/24 Aggregate This Election: \$ 500.00

Business or Organization Name: Friends of Amber Huett Garcia **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4653 Chickasaw Rd City: Memphis State: TN Zip Code: 38117
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 4/23/24 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: \$ _____

Total Contributions: \$ 17,500.00

(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.)

	A	B	C	D	E	F	G
1	Amount	Donor First Name	Donor Last Name	Donor Address Line 1	Donor City	Donor State	Donor ZIP
2	500	Christine	Todd	600 Center Drive	Memphis	TN	38112
3	100	James	Boyd	6367 Shadowood Lane	Memphis	TN	38119
4	250	Shirley	Page	5095 Locust Bend Road	Memphis	TN	38125
5	1000	Patrick	Washington	2847 Hoover Rd	Holly Springs	MS	38635
6	100	Alice	Thompson	652 Whitesboro Ave	Memphis	TN	38109
7	50	Sharon	Spencer	8644 Jackie Dr	Southaven	MS	38672
8	250	Vincent	Mccaskill	3699 Marcia Louise Dr	Southaven	MS	38672
9	250	Jeffrey	Higgs	4021 Baskel Dr	Memphis	TN	38116
10	1000	Herman	Morris	1800 Overton Park Avenue	Memphis	TN	38112
11	250	Jeff	Warren	215 Buena Vista	Memphis	TN	38112
12	100	Dennis	Thomas	435 W Erie St	Chicago	IL	60654
13	100	Dr. Eric	Winston	2921 Meadowfair Rd	Memphis	TN	38118
14	25	Daphnee	R. Harris	3192 Hardin Avenue, 5	Memphis	TN	38119
15	250	Zafar	Brooks	10079 Tate Lane	Frisco	TX	75033
16	250	LaToya	Brooks	1449 Bridgewater Rd	Shelby County	TN	38018
17	100	Tarol Page	Clements	14312 Red Chip Trail	Olive Branch	TN	38654
18	250	Stephen	Wherry	10419 Valley Run Lane	Shelby County	TN	38016
19	50	Katy	Spurlock	1741 Seven Pines Lane	Chattanooga	TN	37415
20	500	Shavonne	Dorsey-Moffett	1408 N. Riverfront Blvd.	Dallas	TX	75206
21	50	Janice	Frazier-Scott	3221 Ruskin rd.	Memphis	TN	38134
22	500	Carmen	Fondren	8619 Beckenham Dr	Cordova	TN	38016
23	50	Tredenia	Fulton	6517 Annielee Street	Millington	TN	38053
24	100	Thomas	Rogers	4052 Bordeaux Ridge Cove S	Memphis	TN	38125
25	100	Lionel	Davis II	693 Radiance Dr	Cordova	TN	38018
26	50	Paula	Raines	744 Cypress Drive	Memphis	TN	38112
27	50	Delores	Quinn	600 Devonhall Street, Apt 104	Las Vegas	NV	89145
28	100	Alfunsia	Merriw.ether	495 Brook Ridge Circle,	Shelby County	TN	38018
29	100	Mary	Moore	8629 Meadow Vale Dr	Memphis	TN	38125
30	30	Angela	Askew	6346 Raner Creek Dr	Memphis	TN	38135
31	500	Dorsey	Hopson	565 st Nick dr	Memphis	TN	38117
32	1000	Alandas	Dobbins	1109 Island Place E	Memphis	TN	38103
33	50	Marilyn	Coleman	3419 Tyron Cove	Memphis	TN	38135

\$ 5,555.00

	H	I	J
1	Donor Occupation	Donor Email	Payment Method
2	Not Employed	ctoddmem@aol.com	Apple Pay
3	Not Employed	thejimboyd@gmail.com	Card
4	Not Employed	shirleypg7@gmail.com	Card
5	CEO	ptrwash@aol.com	Card
6	Not Employed	Honeybabysugarchild@gmail.com	Google Pay
7	Account Rep	sdsen929@gmail.com	Card
8	Not Employed	vince.mccaskill@schoolseed.org	Apple Pay
9	CEO	jthmsinc@comcast.net	Card
10	Attorney	herman.morris@gmail.com	Card
11	Not Employed	Jefferson.c.warren@gmail.com	Card
12	Vice President	dthomas@organiclifeusa.com	Card
13	Pastor	elwinston@aol.com	Card
14	Interior Designer	deeharris@deeharrisinteriors.com	Google Pay
15	Vice President	zjbrooks@me.com	Apple Pay
16	Accounting	lbrooks98@hotmail.com	Card
17	Manager	tarol.clements@yahoo.com	Card
18	Logistics	stephenfme@yahoo.com	Card
19	Social worker	kspurlock@tuci.org	Card
20	Entrepreneur	LeonandShavonne@gmail.com	Card
21	HR Professional	JaniceF51@aol.com	Google Pay
22	CFO	cjfondren74@gmail.com	Card
23	Mortgage Recovery Analyst	dfulton60@gmail.com	Card
24	Administrator	rogerstd@scsk12.org	Card
25	Consultant	davisii.lionel@gmail.com	Apple Pay
26	Realtor	paularaines@gmail.com	Apple Pay
27	Not Employed	sweetquinn@yahoo.com	Card
28	Management	alfunsiamerriwether@gmail.com	Card
29	Minister	revmemoore@gmail.com	Card
30	Manager	askewangela@ymail.com	Apple Pay
31	Consultant	dorseyhopson@yahoo.com	Card
32	Business Owner	alandas@otekatech.com	Card
33	Teacher	mariltncoleman4378@yahoo.com	Card

	A	B	C	D	E	F	G
34	50	Lionel	Davis II	693 Radiance Dr	Cordova	TN	38018
35	100	Jamie	Walker	10167 Evening Hill Dr	Cordova	TN	38016
36	50	Yvonne	Jones	4735 Allendale Dr	Memphis	TN	38128
37	500	Nicole	Lytle	1303 Colonial rd	Memphis	TN	38117
38	250	Pamela	Brown	474 Brook Ridge Cir	Shelby County	TN	38018
39	500	Kendall	K Brooks	1472 Bridgewater Road	CORDOVA	TN	38018
40	100	Carolyn	Jackson	801 Cold Creek Drive	Collierville	TN	38017
41	100	Alicia	Norman	7480 Wood Rail Cove	Memphis	TN	38119
42	500	Michael	Hooks	108 Harbor Town Blvd.	Memphis	TN	38103
43	200	Micah	Ali	501 S. Santa Fe Ave.	Compton	CA	90221
44	250	Kongsouly	Jones	283 South Reese St	Memphis	TN	38111
45	400	michalyn	easter-thomas	1963 Edward Ave	Memphis	TN	38107
46	500	Christine	Todd	600 Center Drive	Memphis	TN	38112
47	100	Rosalind	Stevenson	730 Littty Ct #301	Memphis	TN	38103
48	50	michael	kernell	111 s highland	memphis	TN	38111

\$ 29,205

	H	I	J
34	Consultant	davisii.lionel@gmail.com	Apple Pay
35	Network Specialist	Jamesky97@gmail.com	Google Pay
36	Not Employed	yjones51@bellsouth.net	Card
37	Director	nlytle@manupteach.org	Card
38	Education	pbrown@gtwacademy.com	Card
39	Pest tech	kenbro8283@gmail.com	Google Pay
40	Not Employed	jackson2387@bellsouth.net	Card
41	Director	anorman318@yahoo.com	Card
42	Not Employed	mahjr@allworldmail.com	Card
43	President	micahali@gmail.com	Card
44	Consultant	joneskongsouly@gmail.com	Apple Pay
45	City council	met7@michalynformemphis.com	Card
46	Not Employed	ctoddmem@aol.com	Card
47	Community Engagement	ros11280@yahoo.com	Google Pay
48	legislator	mikekernell@mindspring.com	Card

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

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

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
3. 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 EXPENDITURES - CANDIDATE

ORIGINAL DOCUMENT

1. Candidate or Committee Name: Althea Greene School Board ~~PHOTOCOPY CANNOT BE~~
2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24 ACCEPTED TCA 2-5-102
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: Hostinger OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 18-29 Mora Street City: London State: Eng Zip Code: _____
Purpose of Expenditure: Web Subscription
Amount of Expenditure: \$ 19.08 Date of Expenditure: \$ 5/14/24

Business or Organization Name: A 1 Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 810 E. Brooks Rd City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Yard Signs + Wires
Amount of Expenditure: \$ 3,100.00 Date of Expenditure: \$ 6/13/2024

Business or Organization Name: A 1 Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 810 E. Brooks Rd. City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Yard Signs
Amount of Expenditure: \$ 775.00 Date of Expenditure: \$ 6/14/2024

Business or Organization Name: A 1 Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 810 E. Brooks Rd. City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Large Yard Signs & Handbills
Amount of Expenditure: \$ 2,666.93 Date of Expenditure: \$ 6/24/24

Business or Organization Name: Life Styles OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4077 Thomas St. City: Memphis State: TN Zip Code: 38127
Purpose of Expenditure: T-Shirts
Amount of Expenditure: \$ 700.00 Date of Expenditure: \$ 5/14/24

Total Expenditures: \$ 7,261.01

(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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1. Candidate or Committee Name: Althea Greene for School Board Dist 2
2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 7,261.01

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: Black Market Strategies OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3625 Covington Pike City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Campaign Strategies & Support
Amount of Expenditure: \$ 6,000.00 Date of Expenditure: \$ 6/20/2024

Business or Organization Name: Antonio Suga OR
First Name: Antonio Middle Name: _____ Last Name: Suggs
Address: 774 Melrose #21 City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Sign Distribution
Amount of Expenditure: \$ 400.00 Date of Expenditure: \$ 6/21/24

Business or Organization Name: Antonio S OR
First Name: Antonio Middle Name: _____ Last Name: Suggs
Address: 774 Melrose #21 City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Sign Distribution
Amount of Expenditure: \$ 620.00 Date of Expenditure: \$ 6/26/24

Business or Organization Name: _____ OR
First Name: Angela Middle Name: _____ Last Name: Barksdale
Address: 1850 Foster City: Memphis State: TN Zip Code: 38106
Purpose of Expenditure: Canvassing
Amount of Expenditure: \$ 840.00 Date of Expenditure: \$ 6/27/24

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: \$ 15,121.01

(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

ORIGINAL DOCUMENT
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1. Candidate or Committee Name: Althea Greene for School Board
2. Reporting Period: Start Date: 04/01/24 End Date: 06/30/24
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) \$ 0

Loans Received \$ 0

Loan Payments \$ 0

Outstanding Loan (End) \$ 0

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

ORIGINAL DOCUMENT
 COPIES CANNOT BE
 REPRODUCED
 TCA 2-5-102

- Candidate or Committee Name: Althea Greene for School Board
- Reporting Period: Start Date: 04/01/2024 End Date: 06/30/2024
- Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

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)
\$	\$	\$	\$

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)
\$	\$	\$	\$