



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. Date: 2/16/2024      2.a. Candidate or Committee Name: J.W. Gibson, II

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: (901) 761-2720

5. Candidate Home Address: 3943 North Lakewood Dr  
 City: Memphis      State: TN      Zip Code: 38128      Phone: (901) 346-9002  
 Candidate Email Address: jwgibson@gibsoncompanies.com

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

7. Name of Political Treasurer (may be candidate): Beverly Robertson  
 Political Treasurer Email Address: beverlymrobertson@gmail.com

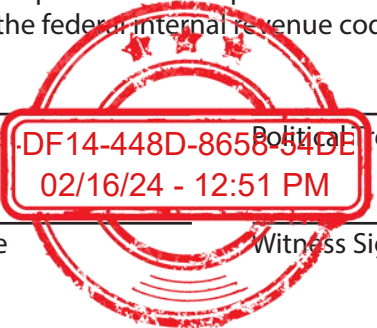
8. Category or Report: (check one)  
 First Quarter     Second Quarter     Third Quarter     Fourth Quarter     Pre-Primary     Pre-General  
 Mid-Year Supplemental     Year-End Supplemental     Runoff Election

9. Reporting Period:      Start Date: 10/1/2023      End Date: 1/15/2023

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>\$5,162.25</u>
b. Total Receipts This Period .....	\$ <u>\$33,750.00</u>
c. Total Disbursements This Period .....	\$ <u>\$36,604.10</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$ <u>\$2,308.15</u>
e. Total Loans Outstanding .....	\$ <u>\$325,000.00</u>
f. Total Obligations Outstanding .....	\$ <u>\$0.00</u>

# SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: J.W. Gibson, II

14. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023

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) ..... \$ \$8,750.00
- c. Loans Received This Reporting Period..... \$ \$25,000.00
- 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.) ..... \$ \$33,750.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$36,604.10  
(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.)..... \$ \$36,604.10

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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
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: Isa Middle Name: \_\_\_\_\_ Last Name: Akil  
Address: 2537 Niblik Pass 201 City: Cordova State: TN Zip Code: 38016  
Occupation: Owner Employer: New Grocery Store  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 10/9/2023 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Harlan Middle Name: \_\_\_\_\_ Last Name: Betlesky  
Address: 2575 Pimberton Cv City: Southaven State: MS Zip Code: 38672  
Occupation: Owner Employer: Side Street Grill  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,800.00 Date of Contribution: 10/2/2023 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kari L. Middle Name: \_\_\_\_\_ Last Name: Betlesky  
Address: 2575 Pimberton Cv City: Southaven State: MS Zip Code: 38672  
Occupation: Owner Employer: Side Street Grill  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,800.00 Date of Contribution: 10/2/2023 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Colin Middle Name: \_\_\_\_\_ Last Name: Christ  
Address: 12 Coachmans Pl City: Wilton State: CT Zip Code: 06897  
Occupation: Printer Employer: Cenveo  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$250.00 Date of Contribution: 10/3/2023 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$4,850.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,850.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: James R. Middle Name: \_\_\_\_\_ Last Name: Chumney Jr.  
Address: 5273 Laurie Ln City: Memphis State: TN Zip Code: 38120  
Occupation: Physician Employer: Self Employed  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$100.00 Date of Contribution: 10/10/2023 Aggregate This Election: \$ \$100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Bob Middle Name: \_\_\_\_\_ Last Name: Edwards  
Address: 12 N Lynncrest Dr City: Chattanooga State: TN Zip Code: 37411  
Occupation: Business Owner Employer: Self Employed  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$25.00 Date of Contribution: 10/9/2023 Aggregate This Election: \$ \$25.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Michelle Middle Name: \_\_\_\_\_ Last Name: Fowlkes  
Address: 78 Pidgeon Rd City: Memphis State: TN Zip Code: 38117  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$50.00 Date of Contribution: 10/10/2023 Aggregate This Election: \$ \$50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Michelle Middle Name: \_\_\_\_\_ Last Name: Fowlkes  
Address: 78 Pidgeon Rd City: Memphis State: TN Zip Code: 38117  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$200.00 Date of Contribution: 10/10/2023 Aggregate This Election: \$ \$200.00

Total Contributions: \$ \$5,225.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,225.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: John Middle Name: \_\_\_\_\_ Last Name: Freeman  
Address: 1262 Island Place East City: Memphis State: TN Zip Code: 38103  
Occupation: Consultant Employer: Self Employed  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$200.00 Date of Contribution: 10/9/2023 Aggregate This Election: \$ \$200.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Assefa Middle Name: \_\_\_\_\_ Last Name: Gebremichael  
Address: 6553 Cottingham Pl City: Memphis State: TN Zip Code: 38120  
Occupation: Business Owner Employer: Self Employed  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 10/9/2023 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Michael Middle Name: \_\_\_\_\_ Last Name: Harper  
Address: 6809 N Seville Ave City: Glendale State: WI Zip Code: 53209  
Occupation: Electrician Employer: M2R Electric  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$50.00 Date of Contribution: 10/3/2023 Aggregate This Election: \$ \$50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Joseph Middle Name: \_\_\_\_\_ Last Name: Lee III  
Address: 7351 Cotton Plant Cv City: Memphis State: TN Zip Code: 38119  
Occupation: Christian Brothers University Employer: Operations Management  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$125.00 Date of Contribution: 10/2/2023 Aggregate This Election: \$ \$125.00

Total Contributions: \$ \$6,600.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,600.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Makowsky Ringel Greenburg LLC **OR**

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

Address: 1010 June Rd City: Memphis State: TN Zip Code: 38124

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 10/6/2023 Aggregate This Election: \$ \$1,000.00

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

First Name: Alicia Middle Name: \_\_\_\_\_ Last Name: Norman

Address: 7480 Wood Rail Cv City: memphis State: TN Zip Code: 38119

Occupation: Director Employer: NET Memphis

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 10/3/2023 Aggregate This Election: \$ \$100.00

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

First Name: Ratan Middle Name: \_\_\_\_\_ Last Name: Singh

Address: 543 S Belvedere Blvd City: Memphis State: TN Zip Code: 38104

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 10/3/2023 Aggregate This Election: \$ \$100.00

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

First Name: Jennifer Middle Name: \_\_\_\_\_ Last Name: Stone

Address: 2903 Society Hill Dr #312 City: Camp Hill State: PA Zip Code: 17011

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 10/2/2023 Aggregate This Election: \$ \$200.00

Total Contributions: \$ \$8,000.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$8,000.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Jennifer Middle Name: \_\_\_\_\_ Last Name: Stone  
Address: 2903 Society Hill Dr #312 City: Camp Hill State: PA Zip Code: 17011  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$500.00 Date of Contribution: 10/9/2023 Aggregate This Election: \$ \$500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Gretchen Middle Name: \_\_\_\_\_ Last Name: Wollert  
Address: 4366 Tuckahoe Rd City: memphis State: TN Zip Code: 38117  
Occupation: Instructor Employer: Ballet Memphis  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$250.00 Date of Contribution: 10/3/2023 Aggregate This Election: \$ \$250.00

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: \$ \$8,750.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
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: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/5/2023

Total Expenditures: \$ \$2,350.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,350.00

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: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/5/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/5/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/5/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/6/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/6/2023

Total Expenditures: \$ \$4,850.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$4,850.00

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: The Hebrew Watchman **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: PO Box 770846 City: Memphis State: TN Zip Code: 38177  
Purpose of Expenditure: Advertising  
Amount of Expenditure: \$ \$550.00 Date of Expenditure: \$ 10/27/2023

Business or Organization Name: Trust Marketing **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 44 N Second St Ste 800 City: Memphis State: TN Zip Code: 38103  
Purpose of Expenditure: Campaign Assistant  
Amount of Expenditure: \$ \$800.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Toni Middle Name: M. Last Name: Hayes  
Address: 2785 Ravenwood Drive City: Bartlett State: TN Zip Code: 38134  
Purpose of Expenditure: Campaign Management  
Amount of Expenditure: \$ \$5,000.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Toni Middle Name: M. Last Name: Hayes  
Address: 2785 Ravenwood Drive City: Bartlett State: TN Zip Code: 38134  
Purpose of Expenditure: Campaign Management  
Amount of Expenditure: \$ \$5,000.00 Date of Expenditure: \$ 10/27/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Toni Middle Name: M. Last Name: Hayes  
Address: 2785 Ravenwood Drive City: Bartlett State: TN Zip Code: 38134  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$322.50 Date of Expenditure: \$ 10/1/2023

Total Expenditures: \$ \$16,522.50

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$16,522.50

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: Melvin Middle Name: \_\_\_\_\_ Last Name: Alexander  
Address: 4182 Eastwick #3 City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$480.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: William Middle Name: \_\_\_\_\_ Last Name: Armstrong  
Address: 5145 Appleville St City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$120.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Corey Jean Middle Name: \_\_\_\_\_ Last Name: Featherson  
Address: 3359 Farmville Ave City: Memphis State: TN Zip Code: 38122  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$615.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kendrick Middle Name: \_\_\_\_\_ Last Name: Gamble  
Address: 5046 Loongbranch Dr City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$307.50 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kendrick Middle Name: \_\_\_\_\_ Last Name: Gamble  
Address: 5046 Loongbranch Dr City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$60.00 Date of Expenditure: \$ 10/4/2023

Total Expenditures: \$ \$18,105.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$18,105.00

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: \_\_\_\_\_ **OR**  
First Name: Kristopher Middle Name: \_\_\_\_\_ Last Name: Graham  
Address: 4679 Cotton Ln City: Memphis State: TN Zip Code: 38118  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$0.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kristopher Middle Name: \_\_\_\_\_ Last Name: Graham  
Address: 4679 Cotton Ln City: Memphis State: TN Zip Code: 38118  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$345.00 Date of Expenditure: \$ 10/24/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Glenda Middle Name: \_\_\_\_\_ Last Name: Hardwick  
Address: 1490 David St City: Memphis State: TN Zip Code: 38114  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$360.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Willene Middle Name: \_\_\_\_\_ Last Name: Jenkins  
Address: 4966 Mosel St City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$630.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Delores Middle Name: \_\_\_\_\_ Last Name: Johnson  
Address: 541 Moline City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$360.00 Date of Expenditure: \$ 10/4/2023

Total Expenditures: \$ \$19,800.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$19,800.00

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: \_\_\_\_\_ **OR**  
First Name: Terrell Middle Name: \_\_\_\_\_ Last Name: Johnson  
Address: 9414 Barkley Hall Drive City: Collierville State: TN Zip Code: 38017  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$1,500.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Ada Middle Name: \_\_\_\_\_ Last Name: Jones  
Address: 1165 Fountain Ct City: Memphis State: TN Zip Code: 38106  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$630.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Jadyn Middle Name: \_\_\_\_\_ Last Name: Nathan  
Address: 23 S. Pauline St City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$120.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Roderick Middle Name: \_\_\_\_\_ Last Name: Nunnally  
Address: 5205 Jeffery Keith City: Bartlett State: TN Zip Code: 38002  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$480.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Roderick Middle Name: \_\_\_\_\_ Last Name: Nunnally  
Address: 5205 Jeffery Keith City: Bartlett State: TN Zip Code: 38002  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 10/3/2023

Total Expenditures: \$ \$23,030.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$23,030.00

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: \_\_\_\_\_ **OR**  
First Name: Evelyn Middle Name: \_\_\_\_\_ Last Name: Perry  
Address: 4315 Davey Cv Apt 201 City: Memphis State: TN Zip Code: 38127  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$60.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Tommy Middle Name: \_\_\_\_\_ Last Name: Ricks  
Address: 421 N Trezevant City: Memphis State: TN Zip Code: 38127  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$240.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Joseph Middle Name: \_\_\_\_\_ Last Name: Robertson  
Address: 1238 Driver St City: Memphis State: TN Zip Code: 38106  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$345.00 Date of Expenditure: \$ 10/1/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Isaac Middle Name: \_\_\_\_\_ Last Name: Singleton  
Address: 8937 Birdlewood Lane City: Cordova State: TN Zip Code: 38016  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Anna Middle Name: \_\_\_\_\_ Last Name: Warm  
Address: 3625 Watauga Ave City: Memphis State: TN Zip Code: 38111  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$780.00 Date of Expenditure: \$ 10/3/2023

Total Expenditures: \$ \$25,455.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$25,455.00

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: \_\_\_\_\_ **OR**  
First Name: Anna Middle Name: \_\_\_\_\_ Last Name: Warm  
Address: 3625 Watauga Ave City: Memphis State: TN Zip Code: 38111  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$580.00 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Anna Middle Name: \_\_\_\_\_ Last Name: Warm  
Address: 3625 Watauga Ave City: Memphis State: TN Zip Code: 38111  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$666.00 Date of Expenditure: \$ 10/27/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Marshall Middle Name: \_\_\_\_\_ Last Name: Williams  
Address: 3715 Hillbrooks City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$690.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Betty Middle Name: \_\_\_\_\_ Last Name: Woodward  
Address: 142 Ivan Rd City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$420.00 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: Google **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1600 Amphitheatre Parkway 3 City: Mountain View State: CA Zip Code: 94043  
Purpose of Expenditure: Email Marketing  
Amount of Expenditure: \$ \$10.00 Date of Expenditure: \$ 10/2/2023

Total Expenditures: \$ \$27,821.00

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$27,821.00

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: Google **OR**

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

Address: 1600 Amphitheatre Parkway 3 City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Email Marketing

Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 10/2/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway 3 City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Email Marketing

Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 10/2/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway 3 City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Email Marketing

Amount of Expenditure: \$ \$36.49 Date of Expenditure: \$ 10/30/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway 3 City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Email Marketing

Amount of Expenditure: \$ (\$0.07) Date of Expenditure: \$ 11/2/2023

Business or Organization Name: Google **OR**

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

Address: 1600 Amphitheatre Parkway 3 City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Email Marketing

Amount of Expenditure: \$ (\$3.97) Date of Expenditure: \$ 12/4/2023

Total Expenditures: \$ \$28,103.45

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$28,103.45

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: LasCabos **OR**

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

Address: 6542 Quince Rd City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Food & Beverage

Amount of Expenditure: \$ \$57.02 Date of Expenditure: \$ 10/10/2023

Business or Organization Name: Kirby Wines & Liquors **OR**

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

Address: 2865 Kirby Parkway City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Food & Beverage

Amount of Expenditure: \$ \$79.00 Date of Expenditure: \$ 10/5/2023

Business or Organization Name: Nothing But Bundt Cakes **OR**

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

Address: 681 S White Station Rd #101 City: Memphis State: TN Zip Code: 38117

Purpose of Expenditure: Food & Beverage

Amount of Expenditure: \$ \$68.54 Date of Expenditure: \$ 10/5/2023

Business or Organization Name: Tha Chicken Mane **OR**

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

Address: 30 Oliver City: Moscow State: TN Zip Code: 38057

Purpose of Expenditure: Food & Beverage

Amount of Expenditure: \$ \$1,500.00 Date of Expenditure: \$ 10/9/2023

Business or Organization Name: Tha Chicken Mane **OR**

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

Address: 30 Oliver City: Moscow State: TN Zip Code: 38057

Purpose of Expenditure: Food & Beverage

Amount of Expenditure: \$ \$385.00 Date of Expenditure: \$ 10/9/2023

Total Expenditures: \$ \$30,193.01

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$30,193.01

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: \_\_\_\_\_ **OR**  
First Name: Willie Middle Name: \_\_\_\_\_ Last Name: Armstrong  
Address: 5145 Appleville St City: Memphis State: TN Zip Code: 38109  
Purpose of Expenditure: Gas  
Amount of Expenditure: \$ \$20.00 Date of Expenditure: \$ 10/1/2023

Business or Organization Name: Costco **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2431 Germantown Pkwy City: Cordova State: TN Zip Code: 38016  
Purpose of Expenditure: Gas  
Amount of Expenditure: \$ \$75.71 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: Hartford Insurance **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: One Hartford Plaza Hartford CT 06115 City: Hartford State: CT Zip Code: 06115  
Purpose of Expenditure: Insurance  
Amount of Expenditure: \$ \$126.77 Date of Expenditure: \$ 10/10/2023

Business or Organization Name: Comcast **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2847 Poplar Ave City: Memphis State: TN Zip Code: 38111  
Purpose of Expenditure: Internet  
Amount of Expenditure: \$ \$195.00 Date of Expenditure: \$ 10/10/2023

Business or Organization Name: Willow Grove LLC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 6070 Poplar Ave Ste 500 City: Memphis State: TN Zip Code: 38119  
Purpose of Expenditure: Rent for HQ Location  
Amount of Expenditure: \$ \$2,900.00 Date of Expenditure: \$ 10/3/2023

Total Expenditures: \$ \$33,510.49

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$33,510.49

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: Numero **OR**

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

Address: 695 Town Center Dr Ste 580 City: Cosa Mesa State: CA Zip Code: 92626

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$7.50 Date of Expenditure: \$ 10/2/2023

Business or Organization Name: Numero **OR**

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

Address: 695 Town Center Dr Ste 580 City: Cosa Mesa State: CA Zip Code: 92626

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$28.14 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: Numero **OR**

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

Address: 695 Town Center Dr Ste 580 City: Cosa Mesa State: CA Zip Code: 92626

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$102.19 Date of Expenditure: \$ 10/9/2023

Business or Organization Name: Numero **OR**

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

Address: 695 Town Center Dr Ste 580 City: Cosa Mesa State: CA Zip Code: 92626

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$6.65 Date of Expenditure: \$ 10/1/2023

Business or Organization Name: Numero **OR**

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

Address: 695 Town Center Dr Ste 580 City: Cosa Mesa State: CA Zip Code: 92626

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 10/1/2023

Total Expenditures: \$ \$33,657.97

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$33,657.97

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: Numero **OR**

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

Address: 695 Town Center Dr Ste 580 City: Cosa Mesa State: CA Zip Code: 92626

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$900.00 Date of Expenditure: \$ 10/1/2023

Business or Organization Name: Numero **OR**

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

Address: 695 Town Center Dr Ste 580 City: Cosa Mesa State: CA Zip Code: 92626

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$870.00 Date of Expenditure: \$ 11/2/2023

Business or Organization Name: Walmart **OR**

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

Address: 7525 Winchester Rd City: Memphis State: TN Zip Code: 38125

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$33.12 Date of Expenditure: \$ 10/1/2023

Business or Organization Name: Dollar General **OR**

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

Address: 5141 Quince Rd City: Memphis State: TN Zip Code: 38117

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$21.95 Date of Expenditure: \$ 10/1/2023

Business or Organization Name: Office Max **OR**

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

Address: 5510 Poplar Ave City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$17.98 Date of Expenditure: \$ 10/10/2023

Total Expenditures: \$ \$35,501.02

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$35,501.02

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: Aldi **OR**

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

Address: 7520 Winchester Rd City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$71.98 Date of Expenditure: \$ 10/5/2023

Business or Organization Name: Aldi **OR**

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

Address: 7520 Winchester Rd City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$35.99 Date of Expenditure: \$ 10/6/2023

Business or Organization Name: Amazon **OR**

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

Address: 410 Terry Ave N City: Seattle State: WA Zip Code: 98109

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$10.40 Date of Expenditure: \$ 10/3/2023

Business or Organization Name: Dollar General Store **OR**

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

Address: 6659 Quince Rd City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$83.68 Date of Expenditure: \$ 10/5/2023

Business or Organization Name: Office Depot **OR**

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

Address: 5510 Poplar Ave City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$69.41 Date of Expenditure: \$ 10/13/2023

Total Expenditures: \$ \$35,772.48

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$35,772.48

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: WalMart **OR**

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

Address: 7525 Winchester Rd City: Memphis State: TN Zip Code: 38125

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$36.83 Date of Expenditure: \$ 10/5/2023

Business or Organization Name: Textedly **OR**

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

Address: 1901 Avenue of the Stars # 200 City: Los Angeles State: CA Zip Code: 90067

Purpose of Expenditure: Texting Service Refund

Amount of Expenditure: \$ (\$3,299.09) Date of Expenditure: \$ 10/1/2023

Business or Organization Name: Streamhoster.com **OR**

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

Address: 11301 W Olympic Blvd 523 City: Los Angeles State: CA Zip Code: 90064

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$49.00 Date of Expenditure: \$ 11/2/2023

Business or Organization Name: Streamhoster.com **OR**

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

Address: 11301 W Olympic Blvd 523 City: Los Angeles State: CA Zip Code: 90064

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$49.00 Date of Expenditure: \$ 12/4/2023

Business or Organization Name: WIX.com **OR**

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

Address: PO Box 40190 City: San Francisco State: CA Zip Code: 94140

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$13.11 Date of Expenditure: \$ 10/4/2023

Total Expenditures: \$ \$32,621.33

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$32,621.33

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: WIX.com **OR**

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

Address: PO Box 40190 City: San Francisco State: CA Zip Code: 94140

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$37.14 Date of Expenditure: \$ 10/4/2023

Business or Organization Name: WIX.com **OR**

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

Address: PO Box 40190 City: San Francisco State: CA Zip Code: 94140

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$13.11 Date of Expenditure: \$ 10/10/2023

Business or Organization Name: WIX.com **OR**

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

Address: PO Box 40190 City: San Francisco State: CA Zip Code: 94140

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$13.11 Date of Expenditure: \$ 11/6/2023

Business or Organization Name: WIX.com **OR**

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

Address: PO Box 40190 City: San Francisco State: CA Zip Code: 94140

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$15.73 Date of Expenditure: \$ 11/6/2023

Business or Organization Name: WIX.com **OR**

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

Address: PO Box 40190 City: San Francisco State: CA Zip Code: 94140

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$37.14 Date of Expenditure: \$ 11/6/2023

Total Expenditures: \$ \$32,737.56

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$32,737.56

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: WIX.com **OR**

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

Address: PO Box 40190 City: San Francisco State: CA Zip Code: 94140

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$13.11 Date of Expenditure: \$ 12/4/2023

Business or Organization Name: WIX.com **OR**

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

Address: PO Box 40190 City: San Francisco State: CA Zip Code: 94140

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$37.14 Date of Expenditure: \$ 12/4/2023

Business or Organization Name: WIX.com **OR**

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

Address: PO Box 40190 City: San Francisco State: CA Zip Code: 94140

Purpose of Expenditure: Voter Contact

Amount of Expenditure: \$ \$15.73 Date of Expenditure: \$ 12/11/2023

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: \$ \$3,600.00 Date of Expenditure: \$ 11/15/2023

Business or Organization Name: Buying Time LLC **OR**

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

Address: 650 Massachusetts Ave Ste 210 City: Washington State: DC Zip Code: 20001

Purpose of Expenditure: Digital Media Refund

Amount of Expenditure: \$ (\$602.65) Date of Expenditure: \$ 12/19/2023

Total Expenditures: \$ \$35,800.89

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$35,800.89

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: Feast & Graze **OR**

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

Address: 55 S Main St 101 City: Memphis State: TN Zip Code: 38103

Purpose of Expenditure: Food & Beverage

Amount of Expenditure: \$ \$442.05 Date of Expenditure: \$ 10/9/2023

Business or Organization Name: The Hartford **OR**

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

Address: 1 Hartford Plaza City: Hartford State: CT Zip Code: 06115

Purpose of Expenditure: Insurance

Amount of Expenditure: \$ (\$71.26) Date of Expenditure: \$ 10/25/2023

Business or Organization Name: Williams Cleaning Services **OR**

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

Address: \_\_\_\_\_ City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Office Cleaning for HQ

Amount of Expenditure: \$ \$130.00 Date of Expenditure: \$ 10/10/2023

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

First Name: Rod Middle Name: \_\_\_\_\_ Last Name: Nunally

Address: 5205 Jefferey Keith City: Bartlett State: TN Zip Code: 38002

Purpose of Expenditure: Signs

Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 10/19/2023

Business or Organization Name: Elite Mobile **OR**

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

Address: 6732 Winchester Rd City: Memphis State: TN Zip Code: 38115

Purpose of Expenditure: TV Removal from HQ

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 10/19/2023

Total Expenditures: \$ \$36,601.68

(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: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$36,601.68

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: Toni Middle Name: \_\_\_\_\_ Last Name: Hayes  
Address: 2785 Ravenwood Dr City: Bartlett State: TN Zip Code: 38134  
Purpose of Expenditure: Campaign Worker  
Amount of Expenditure: \$ \$2.42 Date of Expenditure: \$ 10/1/2023

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

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: \$ \$36,604.10

(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

1. Candidate or Committee Name: J.W. Gibson, II
2. Reporting Period: Start Date: 10/1/2023 End Date: 1/15/2023
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: James Middle Name: Wesley Last Name: Gibson II

Address: 3943 N Lakewood Dr City: Memphis State: TN Zip Code: 38128

Outstanding Loan Balance (Beginning) ..... \$ \$300,000.00

Loans Received ..... \$ \$25,000.00

Loan Payments ..... \$ \$0.00

Outstanding Loan (End) ..... \$ \$325,000.00

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

Date of Loan: 10/2/2023

**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) ..... \$ \$300,000.00

Loans Received ..... \$ \$25,000.00

Loan Payments ..... \$ \$0.00

Outstanding Loan (End) ..... \$ \$325,000.00