

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Kawanias NA McNeary

14. Reporting Period: Start Date: 9/26/2023 End Date: 9/30/2023

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ \$2,028.20
- c. Loans Received This Reporting Period..... \$ _____
- d. Interest Received This Reporting Period \$ _____
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$2,028.20

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$1,940.08
(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.)..... \$ \$1,940.08

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: Kawantias NA McNeary
2. Reporting Period: Start Date: 9/26/2023 End Date: 9/30/2023
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: Kawantias Middle Name: _____ Last Name: McNeary
Address: 4231 Shadowfall Drive City: Memphis State: TN Zip Code: 38141
Occupation: Clerical Employer: County
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$700.00 Date of Contribution: 9/26/2023 Aggregate This Election: \$ \$700.00

Business or Organization Name: _____ **OR**
First Name: Katrina Middle Name: _____ Last Name: Peete
Address: 1296 Trail Run Lane City: Cordova State: TN Zip Code: 38016
Occupation: Clerical Employer: County
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$98.25 Date of Contribution: 9/28/2023 Aggregate This Election: \$ \$98.25

Business or Organization Name: _____ **OR**
First Name: Kawantias Middle Name: _____ Last Name: McNeary
Address: 4231 Shadowfall Drive City: Memphis State: TN Zip Code: 38141
Occupation: Clerical Employer: County
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$732.70 Date of Contribution: 9/28/2023 Aggregate This Election: \$ \$732.70

Business or Organization Name: _____ **OR**
First Name: Kawantias Middle Name: _____ Last Name: McNeary
Address: 4231 Shadowfall Drive City: Memphis State: TN Zip Code: 38141
Occupation: Clerical Employer: County
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$497.25 Date of Contribution: 9/29/2023 Aggregate This Election: \$ \$497.25

Total Contributions: \$ \$2,028.20

(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: Kawanias NA McNeary
2. Reporting Period: Start Date: 9/26/2023 End Date: 9/30/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Message In A Bottle Productions **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1679 Bonnie Lane Suite 106 City: Cordova State: TN Zip Code: 38016
Purpose of Expenditure: Video
Amount of Expenditure: \$ \$710.13 Date of Expenditure: \$ 9/28/2023

Business or Organization Name: WMC TV 5/Gray TV **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1960 Union Ave City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Campaign Commercial
Amount of Expenditure: \$ \$732.70 Date of Expenditure: \$ 9/28/2023

Business or Organization Name: WDIA Radio Station **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2650 Thousand Oaks Blvd City: Memphis State: TN Zip Code: 38118
Purpose of Expenditure: Campaign Advertising
Amount of Expenditure: \$ \$497.25 Date of Expenditure: \$ 9/29/2023

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ \$1,940.08

(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.)