



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 12/8/2023 2.a. Candidate or Committee Name: Rhonda Logan

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 10/5/2023

4. Campaign Address: 6025 STAGE RD / SUITE 42-221
 City: MEMPHIS State: TN Zip Code: 38134 Phone: _____

5. Candidate Home Address: 4971 RIDGE PARK DR.
 City: MEMPHIS State: TN Zip Code: 38128 Phone: (901) 573-5440
 Candidate Email Address: rlynette317@hotmail.com

6. Office Sought: (include district number, if applicable) Memphis City Council, Dist. 1

7. Name of Political Treasurer (may be candidate): JAMES WRIGHT
 Political Treasurer Email Address: jwright@thewrightssolutions.net

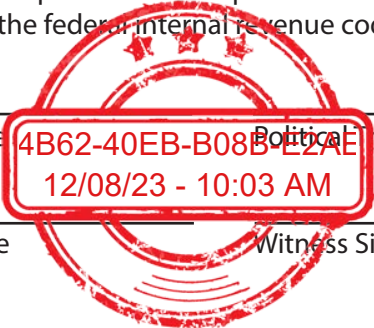
8. Category or Report: (check one)
 First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 Mid-Year Supplemental Year-End Supplemental Runoff Election

9. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023

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>\$6,197.20</u>
b. Total Receipts This Period	\$ <u>\$16,106.21</u>
c. Total Disbursements This Period	\$ <u>\$8,484.81</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$13,818.60</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Rhonda Logan

14. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$1,406.21
(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) \$ \$14,700.00
- 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.) \$ \$16,106.21

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$8,484.81
(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.)..... \$ \$8,484.81

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: Rhonda Logan
2. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023
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: JIM Middle Name: _____ Last Name: HARBIN
Address: 6559 ROYAL VALLEY CV City: BARTLETT State: TN Zip Code: 38135
Occupation: PASTOR Employer: COMMUNITY CHURCH
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$300.00 Date of Contribution: 9/8/2023 Aggregate This Election: \$ \$300.00

Business or Organization Name: BICO ASSOCIATES **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO BOX 3061 City: MEMPHIS State: TN Zip Code: 38173
Occupation: REAL ESTATE INVESTORS Employer: N/A
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,800.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: CITIZENS FOR BETTER GOVERNMENT **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5400 POPLAR AVE City: MEMPHIS State: TN Zip Code: 38119
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$500.00

Business or Organization Name: MAKOWSKY RINGEL GREENBERG, LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1010 JUNE RD City: MEMPHIS State: TN Zip Code: 38124
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$3,100.00

(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: Rhonda Logan
2. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,100.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: ALCO MANAGEMENT **OR**

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

Address: 35 UNION AVE City: MEMPHIS State: TN Zip Code: 38103

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$500.00

Business or Organization Name: EVANS AND PETREE PC PAC **OR**

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

Address: 1 City: MEMPHIS State: TN Zip Code: 38134

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: MICHAEL Middle Name: _____ Last Name: KEENEY

Address: 6070 Woodway Dr City: MEMPHIS State: TN Zip Code: 38120

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$500.00

Business or Organization Name: OVERTON SQUARE LLC **OR**

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

Address: 5264 POPLAR AVE City: MEMPHIS State: TN Zip Code: 38119

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$5,100.00

(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: Rhonda Logan
2. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,100.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: JOE Middle Name: _____ Last Name: JARRATT
Address: 106 S. PERKINS City: MEMPHIS State: TN Zip Code: 38117
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: J Middle Name: BAYARD Last Name: BOYLE JR
Address: PO BOX 17800 City: MEMPHIS State: TN Zip Code: 38167
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: MATTHEW Middle Name: _____ Last Name: HAYDEN
Address: 8426 S OAK SHADOWS City: MEMPHIS State: TN Zip Code: 38119
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: BAYARD Middle Name: B Last Name: MORGAN
Address: 7491 MCVAY RD City: MEMPHIS State: TN Zip Code: 38138
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$6,100.00

(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: Rhonda Logan
2. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,100.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: WILLIAM Middle Name: T Last Name: HUTTON
Address: 400 S SHADY GROVE RD City: MEMPHIS State: TN Zip Code: 38120
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: MARK Middle Name: J Last Name: HALPERIN
Address: 1370 W MASSEY RD City: MEMPHIS State: TN Zip Code: 38120
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: DEXTER Middle Name: _____ Last Name: MULLER
Address: 3800 Berlinwood Cv N City: MEMPHIS State: TN Zip Code: 38133
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 9/15/2023 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: JADE Middle Name: _____ Last Name: THORTON
Address: 8866 CHERRY TREE CV City: CORDOVA State: TN Zip Code: 38018
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 9/21/2023 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$7,300.00

(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: Rhonda Logan
2. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,300.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: LEGACY PAC **OR**

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

Address: 60 N BB KING BLVD City: MEMPHIS State: TN Zip Code: 38103

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$2,000.00 Date of Contribution: 9/22/2023 Aggregate This Election: \$ \$2,000.00

Business or Organization Name: _____ **OR**

First Name: DEIDRE Middle Name: _____ Last Name: MALONE

Address: 333 N AVALON City: MEMPHIS State: TN Zip Code: 38112

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 9/25/2023 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: ANDRE Middle Name: _____ Last Name: DEAN

Address: 88 UNION AVE City: MEMPHIS State: TN Zip Code: 38103

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 8/8/2023 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: REGINALD Middle Name: _____ Last Name: ALEXANDER

Address: 3376 WOLF SHADOW LANE City: BARTLETT State: TN Zip Code: 38133

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 8/16/2023 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$10,550.00

(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: Rhonda Logan
2. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$10,550.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: ANTHONY Middle Name: _____ Last Name: WILLIAMS
Address: 3162 WASHING COVE City: MEMPHIS State: TN Zip Code: 38134
Occupation: RESTORATION Employer: SELF EMPLOYED
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 8/23/2023 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: Metropolitan Mphs Hotel & Lodging Asso **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8544 Rankin Branch Rd City: MILLINGTON State: TN Zip Code: 38053
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$2,000.00 Date of Contribution: 8/28/2023 Aggregate This Election: \$ \$2,000.00

Business or Organization Name: COMCAST CORP **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1701 JFK BLVD City: PHILADELPHIA State: PA Zip Code: 19103
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 8/26/2023 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**
First Name: JENNIFER Middle Name: _____ Last Name: SINK
Address: 102 Saint Albans Fairway City: MEMPHIS State: TN Zip Code: 38111
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 9/8/2023 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$14,700.00

(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: Rhonda Logan
2. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023
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: _____ **OR**
First Name: MERLEAN Middle Name: _____ Last Name: HILL
Address: UNKNOWN City: MEMPHIS State: TN Zip Code: 38101
Purpose of Expenditure: CAMPAIGN WORKER
Amount of Expenditure: \$ \$480.00 Date of Expenditure: \$ 9/25/2023

Business or Organization Name: AFLCIO **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1870 MADISON AVE City: MEMPHIS State: TN Zip Code: 38103
Purpose of Expenditure: CAMPAIGN DONATION
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 8/29/2023

Business or Organization Name: _____ **OR**
First Name: ANNETTE Middle Name: _____ Last Name: CLARK
Address: UNKNOWN City: MEMPHIS State: TN Zip Code: 38101
Purpose of Expenditure: CAMPAIGN MARKETING
Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 9/5/2023

Business or Organization Name: FED EX **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5985 Stage Rd City: BARTLETT State: TN Zip Code: 38134
Purpose of Expenditure: POSTAGE AND DELIVERY
Amount of Expenditure: \$ \$219.49 Date of Expenditure: \$ 8/28/2023

Business or Organization Name: KINGS EDITION **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4000 SUMMER AVE City: MEMPHIS State: TN Zip Code: 38122
Purpose of Expenditure: ADVERTISING
Amount of Expenditure: \$ \$617.70 Date of Expenditure: \$ 9/18/2023

Total Expenditures: \$ \$1,767.19

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Rhonda Logan
2. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,767.19

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

Business or Organization Name: _____ **OR**
First Name: LEXIE Middle Name: _____ Last Name: CARTER
Address: UNKNOWN City: MEMPHIS State: TN Zip Code: 38101
Purpose of Expenditure: ADVERTISING
Amount of Expenditure: \$ \$450.00 Date of Expenditure: \$ 9/13/2023

Business or Organization Name: _____ **OR**
First Name: DONALD Middle Name: _____ Last Name: KIRKLAND
Address: UNKNOWN City: MEMPHIS State: TN Zip Code: 38101
Purpose of Expenditure: ADVERTISING
Amount of Expenditure: \$ \$490.22 Date of Expenditure: \$ 8/22/2023

Business or Organization Name: LIFESYTLES **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4570 RALEIGH - LAGRANGE RD City: MEMPHIS State: TN Zip Code: 38128
Purpose of Expenditure: SCREEN PRINTING
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 8/15/2023

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: PRINTING AND REPRODUCTION
Amount of Expenditure: \$ \$940.22 Date of Expenditure: \$ 8/7/2023

Business or Organization Name: BLACK MARKET STRATEGY **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3625 COVINTON PIKE City: MEMPHIS State: TN Zip Code: 38128
Purpose of Expenditure: CAMPAIGN MARKETING
Amount of Expenditure: \$ \$4,050.00 Date of Expenditure: \$ 9/11/2023

Total Expenditures: \$ \$8,197.63

(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: Rhonda Logan
2. Reporting Period: Start Date: 7/1/2023 End Date: 9/25/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$8,197.63

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: UNITEMIZED EXPENDITURES **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNKNOWN City: MEMPHIS State: TN Zip Code: 38101
Purpose of Expenditure: MISCELLANEOUS
Amount of Expenditure: \$ \$287.18 Date of Expenditure: \$ 9/25/2023

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: \$ \$8,484.81

(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.)