



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

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

1. Date: 1/29/24 2.a. Candidate or Committee Name: Friends for Mike Peluzzolo
 2.b. If Committee, Name of Candidate: Mike Peluzzolo 3. Election Date: 11/3/2026
 4. Campaign Address: 2455 Arthur Road
 City: Germantown State: TN Zip Code: 38138 Phone: 901.568.5568
 5. Candidate Home Address: same as above
 City: _____ State: _____ Zip Code: _____ Phone: _____
 Candidate Email Address: mpaluzzolo19@yahoo.com
 6. Office Sought: (include district number, if applicable) Mayor - Germantown
 7. Name of Political Treasurer (may be candidate): Miki Peluzzolo
 Political Treasurer Email Address: mpaluzzolo19@yahoo.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

9. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024

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.

<u> Mike Peluzzolo </u>	<u> 1/29/2024 </u>	<u> Mike Peluzzolo </u>	<u> 1/29/2024 </u>
Candidate Signature	Date	Political Treasurer Signature	Date
<u> Elizabeth Love </u>	<u> 1/29/2024 </u>	<u> Jacquelyn S. Carny </u>	<u> 1/29/2024 </u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report	\$ <u> 88,366.69 </u>
b. Total Receipts This Period	\$ <u> 0 </u>
c. Total Disbursements This Period	\$ <u> 18,549.09 </u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u> 69,817.60 </u>
e. Total Loans Outstanding	\$ <u> 0 </u>
f. Total Obligations Outstanding	\$ <u> 0 </u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Friends for Mike Pulizzolo

14. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024

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) \$ 0
- 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.) \$ 0

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 18,549.09
(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.)..... \$ 18,549.09

17. In-Kind Contributions:

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

18. Obligations:

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

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends for Mike Pelazzolo
 2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ _____

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: Verizon Wireless OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Data/Cell Service
 Amount of Expenditure: \$ 66.22 Date of Expenditure: 7/11/2023

Business or Organization Name: GPAC OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 1801 Exeter City: Gtاون State: TN Zip Code: 38138
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 3,000.00 Date of Expenditure: 7/10/2023

Business or Organization Name: Germanatown Community Center OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 3037 Forest Hill Trl City: Gtاون State: TN Zip Code: 38138
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 500.00 Date of Expenditure: 500 7/25/2023

Business or Organization Name: Lambda Alpha International OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: Mphs State: TN Zip Code: _____
 Purpose of Expenditure: Annual Dinner Banquet
 Amount of Expenditure: \$ 180.00 Date of Expenditure: 8/2/23

Business or Organization Name: MIFA OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 910 Venice Ave City: Mphs State: TN Zip Code: 38126
 Purpose of Expenditure: Annual Luncheon Banquet
 Amount of Expenditure: \$ 200.00 Date of Expenditure: 4/3/23

Total Expenditures: \$ 3446.22

(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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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends for Mike Palizzolo
2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3446.22

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: Wolf River Conservancy OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2693 Union Blvd City: Mphs State: TN Zip Code: 38112
Purpose of Expenditure: Annual Dinner Gala
Amount of Expenditure: \$ 250.00 Date of Expenditure: 8/8/2023

Business or Organization Name: Coastal Fish Co. OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 415 Great View Dr. East City: Mphs State: TN Zip Code: 38134
Purpose of Expenditure: Campaign Planning Dinner
Amount of Expenditure: \$ 166.08 Date of Expenditure: 8/4/2023

Business or Organization Name: Verizon Wireless OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Data/Cell Service
Amount of Expenditure: \$ 66.23 Date of Expenditure: 8/9/2023

Business or Organization Name: Urban Land Institute OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. Box 2344 City: Mphs State: TN Zip Code: 38101
Purpose of Expenditure: Seminar
Amount of Expenditure: \$ 35.00 Date of Expenditure: 8/10/2023

Business or Organization Name: GPAC OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1801 Excite City: Galton State: TN Zip Code: 38138
Purpose of Expenditure: Program Support
Amount of Expenditure: \$ 304.00 Date of Expenditure: 8/10/2023

Total Expenditures: \$ 816.31

(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: Friends for Mike Petazzolo
 2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 4762.53

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: Alex's Leonard Stent Foundation for Childhood Cancer OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 333 E. Lancaster City: Wynnewood State: PA Zip Code: 19096
 Purpose of Expenditure: HHS Football Fundraiser for Cancer
 Amount of Expenditure: \$ 250.00 Date of Expenditure: 8/11/2023

Business or Organization Name: GPAC OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 1801 Exeter City: Clinton State: TN Zip Code: 38138
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 662.00 Date of Expenditure: 8/15/2023

Business or Organization Name: Rhodes College OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2000 N. Parkway City: Mphs State: TN Zip Code: 38112
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 1,000.00 Date of Expenditure: 8/17/2023

Business or Organization Name: Houston High Football OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 9755 Wolf River Blvd City: Clinton State: TN Zip Code: 38134
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 9.00 Date of Expenditure: 8/21/2023

Business or Organization Name: Knights of Columbus OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 8151 Poplar Ave City: Clinton State: TN Zip Code: 38138
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 50.00 Date of Expenditure: 8/21/2023

Total Expenditures: \$ 2001.00

(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: Friends for Mike Pelizzolo
- 2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
- 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 6,763.53

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: Germantown Education Foundation OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 3350 Forest Hill Drive TN City: G-town State: TN Zip Code: 38138
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 515.00 Date of Expenditure: 8/28/2023

Business or Organization Name: Premium Parking OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: Washington Ave City: Mphis State: TN Zip Code: 38103
 Purpose of Expenditure: Attend Court for G-town
 Amount of Expenditure: \$ 14.72 Date of Expenditure: 9/1/2023

Business or Organization Name: Verizon Wireless OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Data/Cellular Service
 Amount of Expenditure: \$ 66.23 Date of Expenditure: 9/11/2023

Business or Organization Name: Moondance Grill OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 17305 Germantown City: G-town State: TN Zip Code: 38138
 Purpose of Expenditure: Fundraising Strategy Session
 Amount of Expenditure: \$ 184.00 Date of Expenditure: 9/18/2023

Business or Organization Name: 16th Annual Multi-Cultural Breakfast OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 3600 Elvis Presley Blvd City: Mphis State: TN Zip Code: 38116
 Purpose of Expenditure: Attend Breakfast
 Amount of Expenditure: \$ 55.20 Date of Expenditure: 9/21/2023

Total Expenditures: \$ 835.15

(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: Friends for Mike Palazzolo
- 2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
- 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 7,598.68

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: East Shelby Republican Club OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 7771 Poplar Pike City: Gilman State: TN Zip Code: 38138
 Purpose of Expenditure: Annual Dues
 Amount of Expenditure: \$ 75.00 Date of Expenditure: 9/21/2023

Business or Organization Name: Navy League OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Arthur Guba
 Amount of Expenditure: \$ 100.00 Date of Expenditure: 9/26/2023

Business or Organization Name: ASA Hutchinson Presidential Campaign OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Contribution/Support
 Amount of Expenditure: \$ 100.00 Date of Expenditure: 9/26/2023

Business or Organization Name: Knights of Guba Kivaris Club Gilman OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 7771 Poplar Pike City: Gilman State: TN Zip Code: 38138
 Purpose of Expenditure: Annual Dues
 Amount of Expenditure: \$ 440.00 Date of Expenditure: 9/26/2023

Business or Organization Name: Government Volunteer Fire Center OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 1930 S. Government Rd City: Gilman State: TN Zip Code: 38138
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 50.00 Date of Expenditure: 9/24/2023

Total Expenditures: \$ 765.00

(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: Friends for Mike Polazzolo
- 2. Reporting Period: Start Date: 7/1/2023 End Date: 1/5/2024
- 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 8,363.68

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: The Awards Place OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 1160 W. Poplar Ave City: Collierville State: TN Zip Code: 38017
 Purpose of Expenditure: Mayor's Cup Engraving
 Amount of Expenditure: \$ 296.00 Date of Expenditure: 10/4/2023

Business or Organization Name: Friends for Ferrell Harle OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: Bellair State: TN Zip Code: _____
 Purpose of Expenditure: Contribution for Sen. Harle
 Amount of Expenditure: \$ 500.00 Date of Expenditure: 10/4/2023

Business or Organization Name: Poplar Estetica Homeownia Association OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: Brown State: _____ Zip Code: _____
 Purpose of Expenditure: Annual Dues
 Amount of Expenditure: \$ 100.00 Date of Expenditure: 10/5/2023

Business or Organization Name: Friends for Phillip Spinosi OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: Mpls State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Contribution/Support
 Amount of Expenditure: \$ 250.00 Date of Expenditure: 10/11/2023

Business or Organization Name: Verizon Wireless OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Data/Cellular Service
 Amount of Expenditure: \$ 71.50 Date of Expenditure: 10/11/2023

Total Expenditures: \$ 1217.50

(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: Friends for Mike Paluzzolo
 2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 9,581.18

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: Friends of Ron Cant OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Contribution/Support
 Amount of Expenditure: \$ 500.00 Date of Expenditure: 10/13/2023

Business or Organization Name: Germentown Commission OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2240 S. Germentown City: Colton State: TN Zip Code: 38138
 Purpose of Expenditure: W. Tom Meyers Medicine
 Amount of Expenditure: \$ 113.66 Date of Expenditure: 11/1/2023

Business or Organization Name: Bluff City Tasha / Madonna Lunnis Ctr OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 7007 Poplar Ave City: Colton State: TN Zip Code: 38138
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 503.50 Date of Expenditure: 11/3/2023

Business or Organization Name: Friends of Paul Young OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Contribution/Support
 Amount of Expenditure: \$ 500.00 Date of Expenditure: 11/3/2023

Business or Organization Name: PURE Academy OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 4847 Arroyo Road City: Mpls State: TN Zip Code: 38109
 Purpose of Expenditure: _____
 Amount of Expenditure: \$ 257.30 Date of Expenditure: 11/6/2023

Total Expenditures: \$ 1,874.66

(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: Friends for Mike Paluzzolo
2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 11,455.84

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: Rhodes College OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2000 N. Parkway City: Mpls State: TN Zip Code: 38112
Purpose of Expenditure: Program Support
Amount of Expenditure: \$ 1,000.00 Date of Expenditure: 11/7/2023

Business or Organization Name: LinkedIn Premium OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: Mountain View State: CA Zip Code: _____
Purpose of Expenditure: Annual subscription
Amount of Expenditure: \$ 262.67 Date of Expenditure: 11/9/2023

Business or Organization Name: Verizon Wireless OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Data/Cellular Service
Amount of Expenditure: \$ 69.97 Date of Expenditure: 11/9/2023

Business or Organization Name: Bermentow Community Theatre OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3037 Forest Hill Iron Rd City: Clinton State: TN Zip Code: 38138
Purpose of Expenditure: Program support
Amount of Expenditure: \$ 86.00 Date of Expenditure: 11/24/2023

Business or Organization Name: Stevens for Senate OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Campaign Contribution/Support
Amount of Expenditure: \$ 500.00 Date of Expenditure: 11/28/2023

Total Expenditures: \$ 1,918.14
(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: Friends for Mike Palazzolo
 2. Reporting Period: Start Date: 7/1/2023 End Date: 1/5/2024
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 13,373.98

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: Lambda Alpha Int - Memphis OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: PO Box 72720 City: Phoenix State: AZ Zip Code: 85050
 Purpose of Expenditure: Annual Dues
 Amount of Expenditure: \$ 425.00 Date of Expenditure: 12/1/2023

Business or Organization Name: Bill Powers for Tennessee OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Contribution/Support
 Amount of Expenditure: \$ 1,000.00 Date of Expenditure: 12/1/2023

Business or Organization Name: Costco - Memphis OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: Mphs State: TN Zip Code: _____
 Purpose of Expenditure: Holidays Gifts
 Amount of Expenditure: \$ 288.49 Date of Expenditure: 12/14/2023

Business or Organization Name: GPAC OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 1801 Enter Road City: Gretna State: TN Zip Code: 38138
 Purpose of Expenditure: Program Support
 Amount of Expenditure: \$ 300.00 Date of Expenditure: 12/11/2023

Business or Organization Name: Verizon Wireless OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Data/Cellular Service
 Amount of Expenditure: \$ 69.47 Date of Expenditure: 12/11/2023

Total Expenditures: \$ 2082.96

(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: Friends for Mike Polizzolo
 2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 15,456.94

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: Momentum Nonprofit Partners OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 66 Cooper St City: Mphs State: TN Zip Code: 38104
 Purpose of Expenditure: Non profit Day on the Hill
 Amount of Expenditure: \$ 150.00 Date of Expenditure: 12/15/2023

Business or Organization Name: Kiwanis Club of Germantown OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 7771 Poplar Pike City: Germantown State: TN Zip Code: 38138
 Purpose of Expenditure: Kiwanis support
 Amount of Expenditure: \$ 50.00 Date of Expenditure: 12/15/2023

Business or Organization Name: Kiwanis Club of Germantown OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 7771 Poplar Pike City: Germantown State: TN Zip Code: 38138
 Purpose of Expenditure: Dues + Program support
 Amount of Expenditure: \$ 370.00 Date of Expenditure: 12/15/2023

Business or Organization Name: Costco - Memphis OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Holiday Gifts
 Amount of Expenditure: \$ 144.84 Date of Expenditure: 12/26/2023

Business or Organization Name: Open Memphis OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 216 Cooper Street City: Mphs State: TN Zip Code: 38104
 Purpose of Expenditure: Program support
 Amount of Expenditure: \$ 354.00 Date of Expenditure: 12/26/2023

Total Expenditures: \$ 1068.84

(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: Friends for Mike Pulzeolo
 2. Reporting Period: Start Date: 7/1/2023 End Date: 1/15/2024
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 16,525.78

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: Holiday Flowers OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2316 S. Germantown Rd City: Crown State: TN Zip Code: 38138
 Purpose of Expenditure: Subscription
 Amount of Expenditure: \$ 393.84 Date of Expenditure: 12/28/2023

Business or Organization Name: Friends for Ken Yeiser OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Contribution/Support
 Amount of Expenditure: \$ 750.00 Date of Expenditure: 1/5/2024

Business or Organization Name: Verizon Wireless OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Data/Cellular Service
 Amount of Expenditure: \$ 69.47 Date of Expenditure: 1/9/2024

Business or Organization Name: Republican Women of Purpose OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: Crown State: TN Zip Code: 38138
 Purpose of Expenditure: Annual Dues + Luncheon
 Amount of Expenditure: \$ 60.00 Date of Expenditure: 1/10/2024

Business or Organization Name: Tennessee State Senator Jon Hundberg OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Campaign Contribution/Support
 Amount of Expenditure: \$ 750.00 Date of Expenditure: 1/8/2024

Total Expenditures: \$ 2023.31

(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.)