

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="font-size: 1.2em; font-weight: bold; text-align: center;">AISLINN MCEWEN</div>	14. REPORT COVERING THE PERIOD FROM: <u>10/1/22</u> TO: <u>10/29/22</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ _____

b. Itemized Contributions (over \$100 from each source this period) \$ 1751.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 1751.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ Ø

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ Ø

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 1751.00

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

<u>Food</u>	\$ <u>22.35</u>
<u>advertising</u>	\$ <u>40.00</u>
<u>office supplies</u>	\$ <u>16.38</u>
<u>bank fees</u>	\$ <u>10.00</u>
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 88.73

b. Itemized Expenditures (Over \$100 each payee this period) \$ 566.76

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 655.49

20. LOAN REPAYMENTS MADE THIS PERIOD \$ Ø

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 655.49

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ _____

b. Itemized in-kind contributions (over \$100 from each source this period) \$ _____

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ Ø

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ _____

b. Itemized Obligations Outstanding (Over \$100 each) \$ _____

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ Ø



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE AISLINN McEWEN		2. REPORT COVERING THE PERIOD	
		FROM: 10/1	TO: 10/29
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$88.73
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name DIAMOND PRINTING CO		yard signs	\$410.55
Address 611 N. 3rd St			
City MEMPHIS	State TN		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name BLUFF CITY CLOTHING		book fair donation	\$156.21
Address 3540 SUMMER AVE			
City MEMPHIS	State TN		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
5. TOTAL ITEMIZED EXPENDITURES <small>(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)</small>			\$566.76



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE AISLINN MCEWEN				2. REPORT COVERING THE PERIOD FROM: 10/1/22 TO: 10/29/22			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$1751⁰⁰		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$250.00	
City		State		Zip Code		\$250.00	
Occupation		Employer		Date of Contribution		Aggregate This Election	
				10/03/2022			
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$15000	
City		State		Zip Code		Aggregate This Election	
Occupation		Employer		Date of Contribution			
				10/03/2022			
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$2500	
City		State		Zip Code		Aggregate This Election	
Occupation		Employer		Date of Contribution			
				10/03/2022			
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		\$76⁰⁰	
City		State		Zip Code		Aggregate This Election	
Occupation		Employer		Date of Contribution		\$250.00	
				10/03/2022			
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)</small>					\$501⁰⁰		

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE AISLINN MCEWEN				2. REPORT COVERING THE PERIOD FROM: 10/01/22 TO: 10/29/2022	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$17500
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name AISLINN		Middle Name MCEWEN		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	
Occupation				10/3/2022	
Employer				Amount of Contribution \$2500	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name EVERYTOWN.ORG				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	
Occupation				10/27/2022	
Employer				Amount of Contribution \$10000	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	
Occupation				Aggregate This Election	
Employer				Amount of Contribution	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	
Occupation				Aggregate This Election	
Employer				Amount of Contribution	
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3, of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					125000

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE AISLINN MCEWEN				2. REPORT COVERING THE PERIOD	
				FROM: 10/1/22	TO: 10/29/22
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of In-Kind Contribution	
Occupation		Employer		Aggregate this Election	
Description of In-Kind Contribution					
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)					0

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
AISLINN MCEWEN			FROM: 10/1/22		TO: 10/29/2022	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)						\emptyset

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE AI SLINN McEWEN					2. REPORT COVERING THE PERIOD FROM: 10/1/22 TO: 10/29/22					
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)										
Complete the Following for the Source of the Loan										
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)		
Last Name/Organization Name				Address		Loan Received For:		Date of Loan		
City		State	Zip Code	<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<input type="checkbox"/> Runoff (Local Elections Only)				
List All Endorsers or Guarantors for Above Loan (if more space is needed please attach a page)										
First Name		Middle Name		First Name		Middle Name				
Last Name/Organization Name				Address						
City		State	Zip Code	City		State	Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding						
First Name		Middle Name		First Name		Middle Name				
Last Name/Organization Name				Address						
City		State	Zip Code	City		State	Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding						
First Name		Middle Name		First Name		Middle Name				
Last Name/Organization Name				Address						
City		State	Zip Code	City		State	Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding						
First Name		Middle Name		First Name		Middle Name				
Last Name/Organization Name				Address						
City		State	Zip Code	City		State	Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding						
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16, on summary page.) (Total loan payments should also be shown in item 20, on summary page.) (Total outstanding loan balance should also be shown in item 12.e, on front page.)					Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
									0	

