



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 1/29/2025 2.a. Candidate or Committee Name: Amber Mills

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 11/5/2024

4. Campaign Address: PO Box 253

City: Arlington State: TN Zip Code: 38002 Phone: _____

5. Candidate Home Address: PO Box 253

City: Arlington State: TN Zip Code: 38002 Phone: _____

Candidate Email Address: marlowmills@gmail.com

6. Office Sought: (include district number, if applicable) Shelby County Commissioner, Dist. 1

7. Name of Political Treasurer (may be candidate): Letitia McMahon

Political Treasurer Email Address: robertandleitia@gmail.com

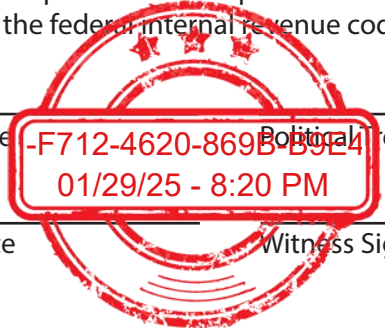
8. Category or Report: (check one)
- First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 Mid-Year Supplemental Year-End Supplemental Runoff Election

9. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025

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: -F712-4620-869B-89E4 Political Treasurer Signature Date



Witness Signature Date Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$23,066.22</u>
b. Total Receipts This Period	\$ <u>\$0.00</u>
c. Total Disbursements This Period	\$ <u>\$0.00</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$23,066.22</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: Amber Mills

14. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025

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) \$ _____
- 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. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ _____
(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.)..... \$ _____

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.) \$ _____