CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

1. Date: 4/28/2026 2.a. Candidate or Committee Name: Andrew Mitchell

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026

4. Campaign Address: 7309 Buckhorn Ct

City: Fairview State: TN Zip Code: 37062 Phone: _____

5. Candidate Home Address: 7309 Buckhorn Ct

City: Fairview State: TN Zip Code: 37062 Phone: _____

Candidate Email Address: andrew@teamandrewmitchell.com

6. Office Sought: (include district number, if applicable) County Commissioner - Dist 01

7. Name of Political Treasurer (may be candidate): Rick Shepherd

Political Treasurer Email Address: shepherdr40@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 ☐ Runoff Election

9. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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

4CED-470E-9796-F069
04/28/26 - 1:54 PM

12. Summary:

a.	Balance On Hand Last Report	$ $6,291.36
b.	Total Receipts This Period	$ $7,900.00
c.	Total Disbursements This Period	$ $13,048.22
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $1,143.14
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Andrew Mitchell

14. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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) ..... $ $7,900.00

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.) ..... $ $7,900.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $13,048.22
(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.)..... $ $13,048.22

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $ _____

b. Itemized In-Kind Contributions Received This Period ..... $ $571.34

c. Total In-Kind Contributions Received This Period ..... $ $571.34

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Andrew Mitchell

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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: Karen Middle Name: _____ Last Name: Dubose/Individual

Address: 1089 Brixworth Dr City: Spring Hill State: TN Zip Code: 37174

Occupation: Chief Deputy Employer: Williamson County

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

Amount of Contribution: $ $100.00 Date of Contribution: 4/2/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Byron Middle Name: _____ Last Name: O'Dell/Individual

Address: 7409 Black Fox Dr City: Fairview State: TN Zip Code: 37062

Occupation: Retired Employer: N/A

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

Amount of Contribution: $ $250.00 Date of Contribution: 4/6/2026 Aggregate This Election: $ $250.00

Business or Organization Name: Charles Sargent PAC **OR**

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

Address: 306 Public Square City: Franklin State: TN Zip Code: 37064

Occupation: PAC Employer: PAC

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

Amount of Contribution: $ $500.00 Date of Contribution: 4/10/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Ronald Middle Name: _____ Last Name: Ellis/Individual

Address: 89 Clark Cove City: Holly Springs State: MS Zip Code: 38635

Occupation: Retired Employer: N/A

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

Amount of Contribution: $ $1,900.0 Date of Contribution: 4/16/2026 Aggregate This Election: $ $1,900.0

Total Contributions: $ $2,750.00

(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: Andrew Mitchell

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $2,750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

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

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

Address: 915 Lewisburg Pike City: Franklin State: TN Zip Code: 37064

Occupation: PAC Employer: PAC

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

Amount of Contribution: $ $1,000.0 Date of Contribution: 4/17/2026 Aggregate This Election: $ $1,500.0

Business or Organization Name: _____ **OR**

First Name: Oliver Middle Name: _____ Last Name: Strange/individual

Address: 7996 Tom Patton Rd City: Primm Springs State: TN Zip Code: 38476

Occupation: CPA Employer: Self-Employed

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

Amount of Contribution: $ $1,900.0 Date of Contribution: 4/17/2026 Aggregate This Election: $ $1,900.0

Business or Organization Name: _____ **OR**

First Name: Jesse Middle Name: _____ Last Name: Crooks/individual

Address: 201 Johnson Rd City: McDonald State: TN Zip Code: 37353

Occupation: Retired Employer: N/A

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

Amount of Contribution: $ $1,900.0 Date of Contribution: 4/20/2026 Aggregate This Election: $ $1,900.0

Business or Organization Name: _____ **OR**

First Name: Beth Middle Name: _____ Last Name: Allen/individual

Address: 7306 Buckhorn Ct City: Fairview State: TN Zip Code: 37062

Occupation: Retired Employer: N/A

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

Amount of Contribution: $ $200.00 Date of Contribution: 4/21/2026 Aggregate This Election: $ $200.00

Total Contributions: $ $7,750.00

(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: Andrew Mitchell

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $7,750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: ______ **OR**

First Name: Lee Middle Name: ______ Last Name: Reeves/Campaign

Address: 1402 Championship BLVD City: Franklin State: TN Zip Code: 37064

Occupation: Representative Employer: TN Statehouse

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

Amount of Contribution: $ $150.00 Date of Contribution: 4/22/2026 Aggregate This Election: $ $150.00

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

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

Amount of Contribution: $______ Date of Contribution: ______ Aggregate This Election: $ ______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

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

Amount of Contribution: $______ Date of Contribution: ______ Aggregate This Election: $ ______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

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

Amount of Contribution: $______ Date of Contribution: ______ Aggregate This Election: $ ______

Total Contributions: $ $7,900.00

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Andrew Mitchell

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

3. Total in-kind contributions from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars ($100) from any contributor during the period must be reported.

Business or Organization Name: _____ **OR**

First Name: Rick Middle Name: _____ Last Name: Shepherd/Individual

Address: 7208 King Rd City: Fairview State: TN Zip Code: 37062

Occupation: Retired Employer: Retired

In-Kind Contribution Received For: ■ Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: $$71.34 In-Kind Contribution Date: 4/10/2026 Aggregate This Election: $ $426.59

Description of In-Kind Contribution: Just Desserts Cake Purchase

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Business or Organization Name: _____ **OR**

First Name: Cam Middle Name: _____ Last Name: Harrington/Individual

Address: 600A Frasier Dr. City: Franklin State: TN Zip Code: 37067

Occupation: Co-Owner Employer: Davis General

In-Kind Contribution Received For: ■ Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: $$500.00 In-Kind Contribution Date: 4/11/2026 Aggregate This Election: $ $500.00

Description of In-Kind Contribution: Food for Event

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Occupation: _____ Employer: _____

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

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Occupation: _____ Employer: _____

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

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $ _____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: $ $571.34

(Carry forward to the 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 the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Andrew Mitchell

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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: Vista Print **OR**

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

Address: 275 Wyman St City: Waltham State: MA Zip Code: 02415

Purpose of Expenditure: Campaign Logo Hats

Amount of Expenditure: $ $132.47 Date of Expenditure: $ 4/1/2026

Business or Organization Name: Vista Print **OR**

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

Address: 275 Wyman St City: Waltham State: MA Zip Code: 02415

Purpose of Expenditure: Campaign Window Clings

Amount of Expenditure: $ $36.90 Date of Expenditure: $ 4/3/2026

Business or Organization Name: Ecanvasser App **OR**

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

Address: 27 Upper Pembroke St City: Dublin State: Irela Zip Code: 02361

Purpose of Expenditure: App for canvassing voters

Amount of Expenditure: $ $99.00 Date of Expenditure: $ 4/3/2026

Business or Organization Name: Meta **OR**

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

Address: 1 Meta Way City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media Ads Campaign

Amount of Expenditure: $ $232.03 Date of Expenditure: $ 4/5/2026

Business or Organization Name: Fairview Titians Youth Sports **OR**

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

Address: PO Box 624 City: Fairview State: TN Zip Code: 37062

Purpose of Expenditure: Marketing for Fundraiser

Amount of Expenditure: $ $200.00 Date of Expenditure: $ 4/6/2026

Total Expenditures: $ $700.40

(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: Andrew Mitchell

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $700.40

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: Frankin Rotary at Noon **OR**

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

Address: 110 Everbright Ave City: Franklin State: TN Zip Code: 37064

Purpose of Expenditure: Quarterly Dues

Amount of Expenditure: $ $258.75 Date of Expenditure: $ 4/6/2026

Business or Organization Name: Winred Fundraising **OR**

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

Address: 4250 Fairfax Dr. Suite 600 City: Arlington State: VA Zip Code: 22203

Purpose of Expenditure: Fees for fundraising on Winred platfrom

Amount of Expenditure: $ $9.85 Date of Expenditure: $ 4/8/2026

Business or Organization Name: Republican Women of Williamson County **OR**

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

Address: 625 Bakers Bridge Ste 105-234 City: Franklin State: TN Zip Code: 37067

Purpose of Expenditure: Donation

Amount of Expenditure: $ $140.00 Date of Expenditure: $ 4/9/2026

Business or Organization Name: Fairveiw Deli and Fuel **OR**

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

Address: 2203 Fairview BLVD City: Fairview State: TN Zip Code: 37062

Purpose of Expenditure: Fuel

Amount of Expenditure: $ $125.00 Date of Expenditure: $ 4/10/2026

Business or Organization Name: Caliber Contact **OR**

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

Address: 2941 Lake Vista Dr City: Lewisville State: TX Zip Code: 75067

Purpose of Expenditure: Mailer Campaign

Amount of Expenditure: $ $2,444.35 Date of Expenditure: $ 4/14/2026

Total Expenditures: $ $3,678.35

(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: Andrew Mitchell

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $3,678.35

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: Vista Print **OR**

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

Address: 275 Wyman St City: Waltham State: MA Zip Code: 02415

Purpose of Expenditure: Campaign signs

Amount of Expenditure: $ $1,000.00 Date of Expenditure: $ 4/16/2026

Business or Organization Name: Fairview Waves **OR**

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

Address: 2714 Fairview BLVD City: Fairview State: TN Zip Code: 37062

Purpose of Expenditure: Donation

Amount of Expenditure: $ $102.50 Date of Expenditure: $ 4/16/2026

Business or Organization Name: Vista Print **OR**

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

Address: 275 Wyman St City: Waltham State: MA Zip Code: 02415

Purpose of Expenditure: Campaign shirts and hats

Amount of Expenditure: $ $395.14 Date of Expenditure: $ 4/16/2026

Business or Organization Name: Republican Women of Williamson County **OR**

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

Address: 625 Bakers Bridge Ste 105-234 City: Franklin State: TN Zip Code: 37067

Purpose of Expenditure: Luncheon

Amount of Expenditure: $ $82.00 Date of Expenditure: $ 4/19/2026

Business or Organization Name: Caliber Contact **OR**

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

Address: 2941 Lake Vista Dr City: Lewisville State: TX Zip Code: 75067

Purpose of Expenditure: Mailer Campaign

Amount of Expenditure: $ $2,444.35 Date of Expenditure: $ 4/20/2026

Total Expenditures: $ $7,702.34

(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: Andrew Mitchell

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $7,702.34

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: Squarespace **OR**

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

Address: 8 Clarkson St City: New York State: NY Zip Code: 10014

Purpose of Expenditure: Website Fee

Amount of Expenditure: $ $27.44 Date of Expenditure: $ 4/20/2026

Business or Organization Name: Fairview Fuel **OR**

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

Address: 2203 Fairview BLVD City: Fairview State: TN Zip Code: 37062

Purpose of Expenditure: Fuel

Amount of Expenditure: $ $146.98 Date of Expenditure: $ 4/23/2026

Business or Organization Name: Caliber Contact **OR**

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

Address: 2941 Lake Vista Dr City: Lewisville State: TX Zip Code: 75067

Purpose of Expenditure: Mailer Campaign

Amount of Expenditure: $ $2,444.35 Date of Expenditure: $ 4/24/2026

Business or Organization Name: Caliber Contact **OR**

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

Address: 2941 Lake Vista Dr City: Lewisville State: TX Zip Code: 75067

Purpose of Expenditure: Mailer Campaign

Amount of Expenditure: $ $2,260.42 Date of Expenditure: $ 4/25/2026

Business or Organization Name: THM Consulting **OR**

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

Address: 23971 64th Ave. City: Mattawan State: MI Zip Code: 49071

Purpose of Expenditure: SMS Texting Campaign

Amount of Expenditure: $ $161.90 Date of Expenditure: $ 4/25/2026

Total Expenditures: $ $12,743.43

(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: Andrew Mitchell

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $12,743.43

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: Meta **OR**

First Name: ___ Middle Name: ___ Last Name: ___

Address: 1 Meta Way City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media Ads Campaign

Amount of Expenditure: $ $71.00 Date of Expenditure: $ 4/25/2026

Business or Organization Name: Winred Fundraising **OR**

First Name: ___ Middle Name: ___ Last Name: ___

Address: 4250 Fairfax Dr. Suite 600 City: Arlington State: VA Zip Code: 22203

Purpose of Expenditure: Fees for fundraising on platform

Amount of Expenditure: $ $233.79 Date of Expenditure: $ 4/25/2026

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: $ $13,048.22

(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.)