

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 7-2-24 2.a. Candidate or Committee Nan	ne: LRAIG HAYES
2.b. If Committee, Name of Candidate:	3. Election Date: 11-8-22
4. Campaign Address: //56 Inneswood Dr	GALLATIN TN 37066
City: GACLADN State: TN	Zip Code: 37066 Phone: 615 347 8677
5. Candidate Home Address: 156 Inneswo	as De
City: GALLATIN State: TN	Zip Code: 37066 Phone: 4153478677
Candidate Email Address: WTCH65@6M	AIL.COM
6. Office Sought: (include district number, if applicable)	
7. Name of Political Treasurer (may be candidate):	
Political Treasurer Email Address:	RMGTN.COM
8. Category or Report: (check one)	
☐ First Quarter ☐ Second Quarter ☐ Third Quarte	r Fourth Quarter Pre-Primary Pre-Genera
☑Mid-Year Supplemental ☐ Year-End Supplemental	☐ Runoff Election
9. Reporting Period: Start Date: 1-16-24	End Date: 4-30-24
10. Detailed Disclosure: (Check one)	
	cause contributions (including in-kind) received total \$1,000 reporting period. (Complete items 12.d., 12.e., and 12.f.)
This campaign is required to file a detailed financial d total more than \$1,000 and/or expenditures total mo	isclosure because contributions (including in-kind) received re than \$1,000 for this reporting period.
and that this report is an accurate accounting of campa by the candidate committee by the Campaign Financi	ontained in this campaign financial disclosure report is true ign contributions and expenditures required to be reported al Disclosure Act. Additionally, I/we swear or affirm that no personal financial benefit of the candidate or for any other revenue code. Political Treasurer Signature Date 7.2.2024 Date
12. Summary:	
a. Balance On Hand Last Report PM	s_2386.13
b. Total Receipts This Period	\$ <u>Ø</u>
c. Total Disbursements This Perio 2.2024	greete consultating and the state of the sta
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	
e. Iotal Loans Outstanding COMMISSION	
f. Total Obligations Outstanding	
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