

#### **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

#### **For State and Local Candidates For Single-Candidate Committees**

1. Date: 1/3/2024 2.a. Candidate or Committee Nar	ne: MATHY STUAZI
2.b. If Committee, Name of Candidate:	3. Election Date: 8/1/24
4. Campaign Address: 11168 LITHERON RANK	n 175.
City: CASTALLAN SPRINGS State: TN	Zip Code: 37031 Phone: 985-768-6178
5. Candidate Home Address: Sant	
City:State:	
Candidate Email Address: Kacandidate Email Address:	Kathystuart for school board @ gmail.
6. Office Sought: (include district number, if applicable)	HI SCHOOL BOSED DISTRICT 9
7. Name of Political Treasurer (may be candidate): CHEIS	ALEXANGE
Political Treasurer Email Address: CALEXANDEZ Ø83	
8. Category or Report: (check one)	
☐ First Quarter ☐ Second Quarter ☐ Third Quarte	er Fourth Quarter Pre-Primary Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental	Runoff Election
9. Reporting Period: Start Date: 4/1/24	End Date: 6/50/24
10. Detailed Disclosure: (Check one)	
	ecause 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 of total more than \$1,000 and/or expenditures total more	disclosure because contributions (including in-kind) received ore than \$1,000 for this reporting period.
and that this report is an accurate accounting of campa by the candidate committee by the Campaign Finance campaign contributions have been expended for the nonpolitical purpose as defined by the federal internal Candidate signature  Date  1524  Witness Signature  Date	
12. Summary:	11 21120 147
a. Balance On Hand Last Report	H . I - 0 Pm
b. Total Receipts This Period	\$ 14 180.
c. Total Disbursements This Period	\$ 17,280.
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	
e. Total Loans Outstanding COUNTY	\$ 560.00
f. Total Obligations Outstanding Ston	\$ 0. <del>-</del>
SS-1109 (Rev. 8/2023)	Page ofof

#### **SUMMARY PAGE - CANDIDATE**

13. Na	ime of Candidate or Committee: KATHY STUART	
14. Re	porting Period: Start Date: 4/1/24 End Date: 6/3	0/24
	ceipts:	
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)	\$ 4,780. ω
c.	Loans Received This Reporting Period	\$ <u>\$60</u> . @
d.	Interest Received This Reporting Period	\$ <u>0</u> . <del>\odolean</del>
e.	Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.)	
16. Dis	sbursements:	70:52
a.	(Note: Effective January 16, 2023, all expenditures must be itemized.)	
b.	Loan Repayments Made This Period	\$ <u>0</u> . <del>co</del>
c.	Total Obligation Payments Made This Period	\$ O. ω
d.	Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)	
17. ln-	Kind Contributions:	
a.	Unitemized In-Kind Contributions Received This Period	\$ <u>6</u> . co
b.	Itemized In-Kind Contributions Received This Period	
c.	Total In-Kind Contributions Received This Period	
18. Ob	oligations:	
a.	Total Obligations Outstanding (must be shown in item 12.f.)	\$ 6. <del>**</del>

FRED AM PAGE ADL 19 2024

STATELER COUNTY

1. Candidate or Committee Name: KANY STURE	
2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24	
3. Total campaign contributions from preceding page (enter \$0 if first page)	경기적의 경기 (2018년 - 1982년 ) 전 기계 (2018년 ) 전
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	OR
First Name: FRED + ROTH Middle Name:	Last Name: ATES
Address: 1093 ROBERTSON RO City: GALGEN	
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$200.00 Date of Contribution: 4/20/24	Aggregate This Election: \$ 200.
Business or Organization Name:	OR
First Name: ALAN Middle Name:	Last Name: Driver
Address: 135 MT VERNON R.) City: BETHRAGE	
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 200.00 Date of Contribution: 4/20/24	Aggregate This Election: \$ 200.00
Business or Organization Name:	OR
First Name: Kee Middle Name:	Last Name: BRYANT - McCornick
Address: 124 TATTWALL CT City: GALLAT W	State: TV Zip Code: 37066
Occupation: Employer:	
Contribution Received For: Primary Election General Election	
Amount of Contribution: \$250.00 Date of Contribution: 4/20/24	Aggregate This Election: \$250.00
Business or Organization Name:	OR
First Name: Tamy Hayes Middle Name:	Last Name: Hayes
Address: 120 Governors Point BLVD. City: Henderswille	State:
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$200.00 Date of Contribution: 4/20/24	Aggregate This Election: \$
Total Contributions: \$ 850.	
(Carry forward to the next page if additional pages of this form are used. If the	this is the last page of contributions, this
amount must be shown in the summary on first page.)	

Address:   ISO
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.  Business or Organization Name:  First Name:  CT416  Address:  Contribution Received For:  First Name:  Contribution:  Cont
Business or Organization Name:    CITAILS   HAVES   Middle Name:   Last Name:   Last Name:   State:   To Zip Code:   370 66
Business or Organization Name:  First Name: CT416 HATES
Address: IISG   WASSWOOD   DR   City:   GALLATW   State:   TW   Zip Code:   370 GG    Occupation:   Employer:   Contribution Received For:   Primary Election   General Election   Aggregate This Election: \$    Business or Organization Name:   Last Name:   Last Name:   CAJW    Address:   III   Limium   Branch   Exacts   Employer:    Contribution Received For:   Primary Election   General Election   Runoff (Local Elections Only)    Amount of Contribution: \$ 30.   Date of Contribution:   4/20/25   Aggregate This Election: \$    Business or Organization Name:   Date of Contribution:   4/20/25   Aggregate This Election: \$    Business or Organization Name:   Last Name:   Smith    Business or Organization Name:   Last Name:   Smith    Business or Organization Name:   Last Name:   Smith    Contribution:   Smith   Last Name:   Smith   Smith    Contribution:   Smith   Smith   Smith   Smith   Smith    Contribution:   Smith   Sm
Address:   156
Contribution Received For: Primary Election General Election Aggregate This Election: \$    Runoff (Local Elections Only)   Aggregate This Election: \$   Runoff (Local Elections Only)   Aggregate This Election: \$   Runoff (Local Elections Only)   Aggregate This Election: \$   Runoff (Local Elections Only)   Aggregate This Election: \$   Contribution Name:   Last Name: C43w     Catality Catality Strews State: Two Zip Code: \$7031     Contribution Received For:   Primary Election General Election   Runoff (Local Elections Only)     Amount of Contribution: \$30.   Date of Contribution: 4/20/28   Aggregate This Election: \$   Contribution Name:   Last Name: Smith     Contribution Name:   Last Name: Smith     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075     Contribution: \$12   Steat Hooke Way   City: Hensessoure State: Two Zip Code: \$7075
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)  Amount of Contribution: \$ 100.  Date of Contribution: 4/20/24 Aggregate This Election: \$
Amount of Contribution: \$\frac{100.00}{00}\$ Date of Contribution: \frac{4\frac{120\day}{4\frac
Business or Organization Name:  First Name:     Description   Middle Name:   Last N
Address: Mame: Primary Election General Election General Election: \$  Address or Organization Name: Middle Name: Last Name: State: To Zip Code: \$7075  Address: Middle Name: Last Name: State: To Zip Code: \$7075  Address: Middle Name: Last Name: State: To Zip Code: \$7075
Address: 112 Liming Branch Ro City: Caspania Spread State: To Zip Code: 37031  Occupation: Employer:  Contribution Received For:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)  Amount of Contribution: \$\frac{30.5}{20.5} \text{Date} Oate of Contribution: \frac{4}{20/25} Aggregate This Election: \$\frac{5}{20.5} \text{OR}  Business or Organization Name: OR  First Name: SHIRLEY Middle Name: Last Name: SMITH  Address: 12 STEXTHOOLE WAY City: Hensesson Uses State: \text{To} Zip Code: \frac{57075}{20.5}
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)  Amount of Contribution: \$\frac{30.5}{20.5}\$ Date of Contribution: \frac{4}{20.65}\$ Aggregate This Election: \$\frac{5}{20.5}\$  Business or Organization Name:  First Name: Middle Name:  Address: 12 Steathnore Way  City: Henderson Contribution Runoff (Local Elections Only)  Aggregate This Election: \$  OR  Contribution: \frac{4}{20.65}\$  Aggregate This Election: \$  OR  City: Henderson Contribution: \frac{5}{20.5}\$  State: \frac{5}{10.5}\$  Zip Code: \frac{5}{20.75}\$
Amount of Contribution: \$\frac{30.5}{0.000} \text{ Date of Contribution: \$\frac{4\frac{1}{20\frac{1}{20}}}{20.000} \text{ Aggregate This Election: \$\frac{1}{20.000} \text{ OR Business or Organization Name: \$\frac{1}{20.000} \text{ Middle Name: \$\frac{1}{20.000} \text{ Last Name: \$\frac{1}{20.000} \text{ STEXT HOSE (\$\frac{1}{20.0000} \text{ Middle Name: \$\frac{1}{20.0000} \text{ Last Name: \$\frac{1}{20.0000} \text{ STEXT HOSE (\$\frac{1}{20.0000} \text{ Middle Name: \$\frac{1}{20.0000} \text{ State: \$\frac{1}{20.0000} \text{ State: \$\frac{1}{20.00000} \text{ STO7S} \text{ Address: \$\frac{1}{20.00000} \text{ STEXT HOSE (\$\frac{1}{20.00000000000000000000000000000000000
Business or Organization Name:  First Name: SHIRLEY  Middle Name:  Last Name: SMITH  Address: 112 STEATHMORE WAY  City: HENDERSWULLE State: TW Zip Code: 37075
Address: 12 Steathnore Way City: Henderswitz State: Tw Zip Code: 37075
Address: 12 Steathnore Way City: Henderswitz State: Tw Zip Code: 37075
Address: 12 STEATHMORE WAY City: HENDERSWULL State: TN Zip Code: 37075
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$\frac{150.\implies}{20.\implies} Date of Contribution: 4/2\black{\boled{\boled{\boled{\black{\boled{\bol
Business or Organization Name:OR
First Name: WILLIAM Middle Name: Last Name: Last Name: Last Name:
Address: PO Box 812 City: Portage State: TN Zip Code: 37148
Occupation: ATTORNEY Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500. Date of Contribution: 5/8/24 Aggregate This Election: \$ 500.
Total Contributions: \$ 780. ~
(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.)

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1. Candidate or Committee Name: KATHY STVART	
2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/2	4
3. Total campaign contributions from preceding page (enter \$0 if first page)	
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	OF
First Name: Kichae Middle Name:	Last Name: Murity
Address: 940 Lakestore De City: Gaussia	State: TN Zip Code: 37000
Occupation: Employer:	
Contribution Received For: Primary Election General Election  Amount of Contribution: \$\frac{200.\iii}{\infty}\) Date of Contribution: \( \left( \frac{5}{24} \)	□ Runoff (Local Elections Only)  Aggregate This Election: \$ <b>2</b> の。
Business or Organization Name:	OF
First Name: STEVE Middle Name:	Last Name: Faw
Address: 312 W. MAW ST City: GALLATIN	State:
Occupation: Employer:	
Contribution Received For: Primary Election General Election Amount of Contribution: \$ 150. の Date of Contribution: 4/20/24	Runoff (Local Elections Only)  Aggregate This Election: \$ 150.00
Business or Organization Name:	OR
First Name: Middle Name:	Last Name: Carw
Address: 1167 Prantyna Pass City: GAUATW  Occupation: Employer:	
Contribution Received For: Primary Election General Election  Amount of Contribution: \$250. Date of Contribution: 6/4/24	☐ Runoff (Local Elections Only)  Aggregate This Election: \$ 250. ←
Business or Organization Name:	OR
First Name: Middle Name:	Last Name: HARRIS
Address: PO Box 9150 City: Cauxw	State: TN Zip Code: 37066
Occupation: Employer:	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 1,800. Date of Contribution: 6/8/24	_ Aggregate This Election: \$ 1,8ου. ω
Total Contributions: \$ 2,400 (Carry forward to the next page if additional pages of this form are used. If t amount must be shown in the summary on first page.)	his is the last page of contributions, this

1. Candidate or Committee N	ame: KATHY STUART	
2. Reporting Period: Start Da	ate: 4/1/24 End Date: 6/30/24	1
3. Total campaign contribution	ons from preceding page (enter \$0 if first page) \$	4.030.00
, , , , , , , , , , , , , , , , , , ,		
	E ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Nan	ne: Surver County Women's Republica	ACTION PAC OR
	Middle Name:	
Address: Po Box 33	City: Hareannue	State: Tw_ Zip Code: 37077
	Employer:	200000000000000000000000000000000000000
	☐ Primary Election ☐ General Election	Runoff (Local Elections Only)
Amount of Contribution: \$	Date of Contribution: 6/17/24	Aggregate This Election: \$ 500.00
Business or Organization Nan	ne:	OR
First Name: Sowy	Middle Name:	Last Name: Wear Hecever)
Address: 1664 B HWY	2315 City: BETHEAGE	State: TN Zip Code: 37022
Occupation:	Employer:	
Contribution Received For:	☐ Primary Election ☐ General Election	Runoff (Local Elections Only)
	Date of Contribution: 6/25/24	Aggregate This Election: \$ 250. ••
Business or Organization Nan	me:	OR
First Name:	Middle Name:	Last Name:
Address:	City:	State: Zip Code:
	Employer:	
Contribution Received For:	☐ Primary Election ☐ General Election	☐ Runoff (Local Elections Only)
Amount of Contribution: \$	Date of Contribution:	Aggregate This Election: \$
Business or Organization Nar	me:	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: \$
	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.)	

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#### **ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE**

1. Candidate or Committee Name: KATHY STURET			
2. Reporting Period: Start Date: 4/1/24 End Date: 6/30/24			
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$			
COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures me kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g. candidate's name in the purpose of the expenditure section.	nust be itemized. g., postage, printir	. If the expending, etc.) along	diture is an in- ) with the
Business or Organization Name: Quality Printing			OR
First Name: Middle Name:	_ Last Name:		
Address: 141 E. GASTIAN) City: GALLATIN	State: 70	Zip Code:	37066
Purpose of Expenditure: Purch Cazi Durice Re-Ozoez			
Amount of Expenditure: \$ 442,47 Date of Expenditure: \$ 5/19	1/24		
Business or Organization Name: Quality Prwwg			OR
First Name: Middle Name:			
Address: 141. E. GASTIAM City: GALLATIN	State: Tw	Zip Code:	37066
Purpose of Expenditure: Purch Cano Re- ORDEZ			
Amount of Expenditure: \$ 212,55 Date of Expenditure: \$ 516	124		
Business or Organization Name: QUALITY PRINTING			OR
First Name: Middle Name:	_ Last Name:		
Address: 141 E. GASTIANI) City: GALLATIN	State: TN	Zip Code:	37066
Purpose of Expenditure: Purch CARIS			
Amount of Expenditure: \$ 212.55 Date of Expenditure: \$ 4/2	1/24		
Business or Organization Name: Mr. SION MAN			OR
First Name: Middle Name:	_ Last Name:		
Address: De Commerce Die City: Hensessanville	State: TV	Zip Code:	37075
Purpose of Expenditure: SMALL YAZIS SIBNS			
Amount of Expenditure: \$ 759.24 Date of Expenditure: \$ 5/a	20/24		
Business or Organization Name: MR. Sion Man			OR
First Name: Middle Name:	Last Name:		
Address: 129 Commerce Dr City: Hensersonmet	State: 70	Zip Code:	37075
Purpose of Expenditure: Door KNOKEZS			
Amount of Expenditure: \$ 286. 91 Date of Expenditure: \$	aday 4/ac	7/24	
Total Expenditures: \$ 1,913, 72			
(Carry forward to the next page if additional pages of this form are used. If this is	s the last page	of expend	itures, 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: Kann	TUANET		98
2. Reporting Period: Start Date: 4/1/24	End Date: 6/30/24		
3. Total campaign expenditures from preceding p	age (enter \$0 if first page) \$	913.72	
COMPLETE THE APPROPRIATE ITEMS FOR EACH E kind contribution to a candidate, please remember to include candidate's name in the purpose of the expenditure section.	le the purpose of the expenditure (e.g.	ust be itemized. If the expenditure is an , postage, printing, etc.) along with the	in-
Business or Organization Name: MR. Siba	Man		OF
		Last Name:	
First Name: Middle Address: 129 Commerce Diz	City: Henriconville	State: Tw Zip Code: 37075	5
Purpose of Expenditure: Dook Knows			
Amount of Expenditure: \$ 196.63	Date of Expenditure: \$ 4/18	124	
Business or Organization Name: Mr. Siow	Man		OF
First Name: Middle	Name:	Last Name:	
Address: 129 Commerce Dr	City: HENDERSCHVILE	State: Tw Zip Code: 37075	
Purpose of Expenditure: LAIZEE YAIZU	Sibus		
Amount of Expenditure: \$ 918.70	Date of Expenditure: \$ 4/5	124	
Business or Organization Name: FCT			OF
First Name: Middle	Name:	Last Name:	0.
Address: 1870 Air Lave Dirive	City: NASHILLE	State: TN Zip Code: \$7210	
Purpose of Expenditure: Campaion Smil	rs		
Amount of Expenditure: \$ 354.57	Date of Expenditure: \$ 5/2	124	
Business or Organization Name: DoDAT			OR
First Name: Middle	Name:	Last Name:	
Address: 1026 LAUTEN CIT		State: Tw Zip Code: \$7075	5
Purpose of Expenditure: Purch Cazys			
Amount of Expenditure: \$ 167. 88	Date of Expenditure: \$ 6/2	124	
Business or Organization Name: Ww Zey	fees		OR
	Name:	Last Name:	On
	City:	State: Zip Code:	
Purpose of Expenditure: DONATION Fees			
Amount of Expenditure: \$	Date of Expenditure: \$ 4/1/2	4-6/30/24	
Total Expenditures: \$ 3, 738.96			
(Carry forward to the next page if additional page		the last page of expenditures, this	
amount must be shown in the summary on first p	age.)		

#### **ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE**

1. Candidate or Committee Name:						
2. Reporting Period: Start Date:	4/1/24	End Date: 6	/30/24			
3. Total campaign expenditures fr	om preceding p	age (enter \$0 if fir	st page) \$ <u>3</u>	738.94		
COMPLETE THE APPROPRIATE ITE kind contribution to a candidate, please candidate's name in the purpose of the e	MS FOR EACH Extremember to includ	XPENDITURE. All e	expenditures m	nust be itemized	I. If the expending, etc.) along	liture is an in- with the
Business or Organization Name:	Misc Doo	IZ Knockwe	SUPPEY	Fees (E	AS, WATER	SUPPLIED OR
First Name:						
Address:		City:		State:	Zip Code:	
Purpose of Expenditure:						
Amount of Expenditure: \$ 181.	or _	Date of Expendit	ture: \$ <u>4/1</u>	124-6/30	124	
Business or Organization Name:						OR
First Name:						
Address:						
Purpose of Expenditure:						
Amount of Expenditure: \$			ture: \$			
Business or Organization Name:						OR
First Name:						
Address:						
Purpose of Expenditure:						
Amount of Expenditure: \$		Date of Expendit	ture: \$			
Business or Organization Name:						OR
First Name:	Middle	Name:		_ Last Name:		
Address:						
Purpose of Expenditure:						
Amount of Expenditure: \$		Date of Expendit	ture: \$			
Business or Organization Name:						OR
First Name:	Middle	Name:		_ Last Name:		
Address:						
Purpose of Expenditure:						
Amount of Expenditure: \$		Date of Expendit	ture: \$			
Total Expenditures: \$ 3,920.						

(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 LOANS - CANDIDATE**

1. Candidate or Committee Name: $\nu$	CATHY !	STURE	r				
2. Reporting Period: Start Date: 4	1124	_ End	Date: 6/	20/24			
3. Complete the appropriate items for				/	dred dollars (	\$100).	
Complete the following for the source of ea	ch loan receiv	ed and/c	or outstandin	g during the	period.		
Business or Organization Name:	RSUNAL L	שמט					OR
First Name: KATHY					ast Name:	TUART	
Address: 116 B Littera E	BIZANCH	City:	-ASTALIAN	SPIRWES	State: 72	Zip Code:	37031
Outstanding Loan Balance (Beginning	)	\$					
Loans Received			The second secon				
Loan Payments							
Outstanding Loan (End)		\$	360.00				
Loan Received For: , Primary Ele	ction	Genera	l Election	Runof	f (Local Election	ons Only)	
Date of Loan: 6/21/24							
List all endorsers or guarantors for above lo	oan (If more si	oace is ne	eded, please	attach additi	ional pages.)		
Business or Organization Name:							OR
First Name:							
Address:		City: _			State:	Zip Code:	
Amount Guaranteed Outstanding: \$_							
Business or Organization Name: _							OR
First Name:							
Address:							
Amount Guaranteed Outstanding: \$_					June	zip code.	
Business or Organization Name: _	,						OR
First Name:	Middle	Name:			_ Last Name:		
Address:						Zip Code:	
Amount Guaranteed Outstanding: \$_		-					
Business or Organization Name: _							OR
First Name:							
Address:							
Amount Guaranteed Outstanding: \$_							
<b>Totals for all loans</b> (Complete this page for Total loans received and loan payments should							
Balance (Beginning)		\$_					
Loans Received							
Loan Payments		\$_					
Outstanding Loan (End)		\$_					
SS-1132 (Rev. 1/2023)						Pag	ge 10 of 11

1. Candidate or Committee Name:		SATRIBOTIONS - CANDIDATE
2. Reporting Period: Start Date: _	End Date:	
3. Total in-kind contributions from	preceding page (enter \$0 if first	page) \$
COMPLETE THE APPROPRIATE ITEM dollars (\$100) from any contributor during t	CEODEACH IN WIND CONTROL	TION. In-kind contributions totaling more than one hundre
First Name:	Middle Name:	Ol
Address:	City:	Last Name: Zip Code:
Occupation:	Employer:	State: Zip Code:
In-Kind Contribution Received For:	Primary Election	ieneral Election Runoff (Local Elections Only
In-Kind Contribution Value: \$	In-Kind Contribution Date:	Aggregate This Election: \$
Description of In-Kind Contribution:		Aggregate This Election: \$
Business or Organization Name:		
	Middle Name:	Last Name
	CITV:	Ctata.
The reaction received For:	Li Primary Election   166	aporal Floation
value, 5	_ In-Kind Contribution Date:	Aggregate This Flat
Description of In-Kind Contribution:		Aggregate This Election: \$
Business or Organization Name:		OR
First Name:	Middle Name	OR OR
	( 11//:	
Occupation:	Employer:	State: Zip Code:
	_ III MING CONTINUUM DATA	A
Description of In-Kind Contribution:		
usiness or Organization Name:		
	Middle Name:	1 t N1
	( 11//:	
- A Company that	-mnlover-	
	LITHINGIV LIECTION 1 1/200	AOral Floation
Talac. y	In-Kind Contribution Date	A
escription of In-Kind Contribution: _		Aggregate This Election: \$
otal In-Kind Contributions: \$ carry forward to the next page if addit ontributions, this amount must be sho		

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