

## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

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

| 1. Date: 710 23 2.a. Candidate or Committee Name: CM 581 SM th Miller   |
|---|
| 2.b. If Committee, Name of Candidate: 3. Election Date:   |
| 4. Campaign Address: 1005 Thorn HWCt.   |
| City: Hendersonulle State: th Zip Code: 37075 Phone: 615-708-7498   |
| 5. Candidate Home Address: Same   |
| City: State: Zip Code: Phone:   |
| Candidate Email Address: Christin nuller a sum ner county fn. 900   |
| 6. Office Sought: (include district number, if applicable) CCDiStrict 24  |
| 7. Name of Political Treasurer (may be candidate): William B Milly  |
| Political Treasurer Email Address:  |
| 8. Category or Report: (check one)  |
| ☐ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-Genera  |
| Mid-Year Supplemental Year-End Supplemental   |
| 9. Reporting Period: Start Date: 1-16-23 End Date: U-30-23  |
| 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   |
| Harrington 7-10-23 Mauring fon 1-10-23 Witness Signature Date   |
| 12. Summary:  |
| a. Balance On Hand Last Report  |
| b. Total Receipts This Period\$   |
| c. Total Disbursements This Period 1.2.2023 \$  |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) \$ UU 553   |
| e. Total Loans Outstanding  |
| f. Total Obligations Outstanding\$  |
| SS-1109 (Rev. 1/2023)   |