

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 2/25/14 2.a. Candidate or Committee Name: GREG HOLLIS
2.b. If Committee, Name of Candidate: 3/5/24
4. Campaign Address: 1665 Jacons Drive
City: <u>Gallafin</u> State: <u>7N</u> Zip Code: <u>37066</u> Phone: <u>615-427-361</u>
5. Candidate Home Address: 1665 Jacobs Drive
City: <u>C79 Martia</u> State: <u>TN</u> Zip Code: <u>37066</u> Phone: <u>615-427-36</u>
Candidate Email Address: greshollis do a gmail. com
6. Office Sought: (include district number, if applicable) School Board - DISTRICT 6
7. Name of Political Treasurer (may be candidate):
Political Treasurer Email Address: greghollis & gmail - com
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: $1/16/24$ End Date: $2/24/24$
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.
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Candidate Signature Date Date Date Date Date Date
Candidate Signature Date Political Treasurer Signature Date
Withess Signature Witness Signature Date Date
Withess Signature Date Witness Signature Date
\$ \$ \$
333
\$ 5/3/.//
e. Total Loans Outstanding
S-1109 (Rev. 1/2023)

SUMMARY PAGE - CANDIDATE

13. Na	ame of Candidate or Committee: GREG HOLLIS		
14. Reporting Period: Start Date: 1/16/24 End Date: 2/24/24			
15. Receipts:			
a.	Unitemized Contributions (\$100 or less from each source this period)		
b.	Itemized Contributions (over \$100 from each source this period)\$ 6396.0/		
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. Dis	sbursements:		
a.	Total Expenditures (other than loan payments)		
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. ln-l	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.)\$		

1. Candidate or Committee Name: Greg Holls		
2. Reporting Period: Start Date: 1/16/24 End Date: 2/24/2	24	
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: DEANING Middle Name:	Last Name:Dewitt	
Address: 898 Plantation Blvd City: Gallatin	State: TN Zip Code: 37166	
Occupation: <u>refined</u> <u>Employer: refined</u>		
Contribution Received For:	Runoff (Local Elections Only)	
Amount of Contribution: \$ 100 Date of Contribution: 1/16/24	_ Aggregate This Election: \$	
Business or Organization Name:	OR	
First Name: Larry Middle Name:	Last Name: 000M	
Address: 849 Pickwick et City: Gallatin	State: TN Zin Code: 37/66	
Occupation:		
Contribution Received For:		
Amount of Contribution: \$ 500 Date of Contribution: 1/17/04		
Pusiness or Organization Names		
Business or Organization Name:		
Address:	Last Name: Reli	
Occupation: realter Employer: KW	_ State: //v Zip Code:	
Contribution Received For: Primary Election General Election		
Amount of Contribution: \$ 150 Date of Contribution: 1/16/24		
Date of Contribution.	Aggregate This Election: \$	
Business or Organization Name:	OR	
	Last Name:KnowleS	
Address: 955 Plantation Blvd City: Gallatin	State: <u>TN</u> Zip Code: <u>37066</u>	
Occupation: Employer: Employer:	<i>l</i>	
Contribution Received For: Primary Election General Election	☐ Runoff (Local Elections Only)	
Amount of Contribution: \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Aggregate This Election: \$	
0.53		
Total Contributions: \$850		
(Carry forward to the next page if additional pages of this form are used. If th amount must be shown in the summary on first page.)	is is the last page of contributions, this	
and the page,		

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1. Candidate or Committee Name: Greg Hous
2. Reporting Period: Start Date: 1/10/24 End Date: 124/24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.
Business or Organization Name:OR
First Name: Middle Name: Last Name: Wetherington
Address: Po box 1927 City: Gallotin State: TN Zip Code: 37066
Occupation: Employer: Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$\frac{1000}{000}\$ Date of Contribution: $\frac{1/25/24}{29}$ Aggregate This Election: \$\frac{1000}{000}\$
Business or Organization Name: Tammy Hayes Campuign Fund OR
First Name:
Address: 120 Governors Point Blud City: Hendersonville State: TM Zip Code: 37075
Occupation: refined Employer: refined
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 1/25/24 Aggregate This Election: \$ 200
Business or Organization Name:
First Name: Baker Middle Name: Last Name: Ring Address: 461 Brody 4 City: Gallatia State: 70 Zip Code: 37066
Occupation:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$\frac{50}{50}\$ Date of Contribution: $1/2S/24$ Aggregate This Election: \$\frac{50}{50}\$
Business or Organization Name: OF
First Name: Middle Name: Last Name: Murphy
Address: 940 Calcishere City: <u>Brallation</u> State: TN Zip Code: 37066
Occupation: Employer: Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250 Date of Contribution: $1/25/24$ Aggregate This Election: \$ 250
Total Contributions: \$ \$ 1350
Total Contributions: \$
amount must be shown in the summary on first page.)

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1. Candidate or Committee Name: Ang Hours	
2. Reporting Period: Start Date: 1/16/24 End Date: 2/24	124
3. Total campaign contributions from preceding page (enter \$0 if first pag	
	,
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION	N
Business or Organization Name:	OR
First Name: Middle Name:	Last Name: Over ton
Address: 901 Cakeview Ct City: Gallatin	State: TN Zip Code: 370 66
Occupation: Banking Employer: VS	B
Contribution Received For: Primary Election General Electio	n Runoff (Local Elections Only)
Amount of Contribution: \$\\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Aggregate This Election: \$ 200
Business or Organization Name:	OR
First Name: Middle Name:	Last Name: Farino
Address: 202 wooplake Or City: Gollatin	State: 7\(\nu\) Zip Code: 37066
Occupation: Employer:	
Contribution Received For: X Primary Election General Election	n Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1/25/2	4 Aggregate This Election: \$
	OF
Business or Organization Name: Middle Name:	
Address: 1051 Edeluator Cir City: Gallatia	State: TN 7in Code: 37466
Occupation: City: Employer:	
Contribution Received For: Primary Election General Election	Aggregate This Election: \$_50
Amount of Contribution: \$ 50 Date of Contribution: 1/25	Aggregate This Election: 3
Business or Organization Name:	OF
First Name: Middle Name:	Last Name: Kim Brough
	U State: Zip Code: 37075
Occupation: Employer:	refined
Contribution Received For: Primary Election General Election	-1
Amount of Contribution: \$ 125 Date of Contribution: \$ 125	Aggregate This Election: \$/25
Total Contributions: \$	
(Carry forward to the next page if additional pages of this form are used	d. If this is the last page of contributions, this
amount must be shown in the summary on first page.)	

Page <u>5 of /3</u>

1. Candidate or Committee Name: Grag Hours	
2. Reporting Period: Start Date: 1/16/24 End Date: 1/14/179	
3. Total campaign contributions from preceding page (enter \$0 if first page) \$_	1825
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	OR OR
First Name: Middle Name:	_ Last Name: <u>St Peters</u>
Address: 848 Plantation Blvd City: Gallotin	
Occupation: refined Employer: refin	ud
Contribution Received For: Primary Election General Election	
Amount of Contribution: \$ 250 Date of Contribution: 1/26/24	Aggregate This Election: \$ 250
Business or Organization Name:	OR
First Name: Middle Name:	_ Last Name: Whitakw
Address: 1015 Ranch Road City: 10 Portland	_ State: TN Zip Code: 3
Occupation: <u>refined</u> <u>Employer:</u> <u>refines</u>	37148
Contribution Received For:	Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 1/25/24	Aggregate This Election: \$ 200
Business or Organization Name:	OF
First Name: Angula Middle Name:	Last Name: MILYS
Address: 1569 Jacobs DV City: Galletin	State: TN Zip Code: 37066
Occupation: nuticed Employer: utine	d
Contribution Received For: Primary Election General Election	
Amount of Contribution: \$ 520.5/ Date of Contribution: 125/24	Aggregate This Election: \$ 520,51
Business or Organization Name:	OF
First Name: Charlena Middle Name:	Last Name: Auniller
Address: 143 Ruland Cir City: Hendensonrille	State: <u>TN</u> Zip Code: <u>37075</u>
Occupation: Afterney Employer: ICSOLVILO	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 04,10 Date of Contribution: 1/25/24	Aggregate This Election: \$ $104/0$
Total Contributions: \$ 2,899.61	
Total Contributions: \$	nis 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: Greg Hours	
2. Reporting Period: Start Date: 1/16/24 End Date: 2/24/24	_
3. Total campaign contributions from preceding page (enter \$0 if first page) \$_	2899.61
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Name:	OR
First Name: Kathryn Middle Name:	Last Name: <i>G</i> 76 <i>ο</i> Δ
Address: 1267 Overton Go City: Gallatin	State: TN Zip Code: 37066
Occupation: MK+g Employer: Goop	Circle MKts
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 104,10 Date of Contribution: 1/25/24	Aggregate This Election: $$109,70$
Business or Organization Name:	OR
First Name: NICK Middle Name:	Last Name:Church
Address: 12/7 overton arcle City: Gallatin	_ State: <u>7N</u> Zip Code: <u>37066</u>
Occupation: Real Est. Employer: The Cap.	ital Corporation
Contribution Received For: Primary Election General Election	
Amount of Contribution: \$ 500 Date of Contribution: 1/25/24	Aggregate This Election: \$ 500
	OF
Business or Organization Name:	
First Name: Middle Name: Address: 2575 Grassland Shores City: Galletin	Last Name:
Occupation: SAHM Employer: SAHW	
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 52.05 Date of Contribution: 1/26/24	_ Aggregate This Election: \$
Business or Organization Name:	OI
First Name: Ryan Middle Name:	Last Name:Brenning
First Name: Ryan Middle Name:	State: <u>0H</u> Zip Code: <u>43214</u>
Occupation: Sales Employer: Lill	9
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$ 104,10 Date of Contribution: 1/26/24	Aggregate This Election: \$ 104,10
Total Contributions: \$ 3659.86	
(Carry forward to the next page if additional pages of this form are used. If the amount must be shown in the summary on first page.)	nis is the last page of contributions, this
amount must be snown in the summary on hist page.	

1. Candidate or Committee Name: Greg Hours
2. Reporting Period: Start Date: 1/16/24 End Date: 1/14/14
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3654.86
5. Total Campaigh Contributions from preceding page (effect 50 if hist page) 5
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.
Business or Organization Name:OR
First Name: Middle Name: Last Name: Sweeney
Address: 23700 Jusmin Calce City: Bonita Springs State: EL Zip Code: 34135
Occupation: Employer: Employer:
Contribution Received For:
Amount of Contribution: \$\frac{50}{50}\$ Date of Contribution: $\frac{1/27}{27}$ Aggregate This Election: \$\frac{50}{50}\$
Business or Organization Name:OR
First Name: Last Name:
Address: 930 Plantation blod City: Gra latin State: 7N Zip Code: 37066
Occupation: Employer: Employer:
Contribution Received For:
Amount of Contribution: \$ 52.05 Date of Contribution: 1/27/24 Aggregate This Election: \$ 52.05
Business or Organization Name:OR
First Name: Middle Name: Last Name: Wilson
Address: 1276 Potter lane City: Goodlafia State: 12 Zip Code: 37066
Occupation: Sales Employer: EBM Medical
Contribution Received For:
Amount of Contribution: \$ 250 Date of Contribution: $1/27/24$ Aggregate This Election: \$ 250
Business or Organization Name:OF
First Name: Keith Middle Name: Last Name: Heyboer
Address: 262 Sherry Circle City: Gallatin State: TN Zip Code: 37066
Occupation: Toneller Employer: SC BOE
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 52.05 Date of Contribution: $2/i/24$ Aggregate This Election: \$ 52.05
Total Contributions: $\$$ 37 93 9 9 (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: Greg Hows
2. Reporting Period: Start Date: 1/16/24 End Date: 2/24/24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3793.96
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.
Business or Organization Name:
First Name: Middle Name: Last Name: Sinks
Address: 163 Bay Orive City: Hendersonville State: 7N Zip Code: 37075
Occupation: Employer: Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: $\frac{52.05}{}$ Date of Contribution: $\frac{2/2/24}{}$ Aggregate This Election: $\frac{52.05}{}$
Business or Organization Name:OI
First Name: STANLEY Middle Name: Last Name: Fields
Address: 303 Bayshore Nr City: HandleSonu'lle State: TN Zip Code: 37075
Occupation: Employer: Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 2/3/24 Aggregate This Election: \$ 500
Business or Organization Name:OI
First Name: Chip Middle Name: Last Name: Graff
Address: 1056 Jarman lake City: Gallatin State: TN zip Code: 37066
Occupation: whiled Employer: while
Contribution Received For: 🛱 Primary Election 🗌 General Election 🔲 Runoff (Local Elections Only)
Amount of Contribution: \$ 250 Date of Contribution: Aggregate This Election: \$ 250
Business or Organization Name:OI
First Name: Lynn Middle Name: Last Name: EALEY
Address: 2925 Bury Hill Dr City: Nashvilk State: 7 Zip Code: 37204
Occupation: Coo Employer: Cand Solutions Co.
Contribution Received For: 🔀 Primary Election 🗌 General Election 🔲 Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 2/5/24 Aggregate This Election: \$ 500
Total Contributions: \$ 5096.0[(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.)

1. Candidate or Committee Name: Grey Hours
2. Reporting Period: Start Date: 1/16/24 End Date: 2/24/24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.
Business or Organization Name:OR
First Name: Middle Name: Last Name: Last Name:
Address: 1659 Boardwalk Pl. City: Gaslatin State: 70 Zip Code: 37166
Occupation: Employer: Employer: Employer:
Contribution Received For:
Amount of Contribution: \$ 500 Date of Contribution: $2/4/24$ Aggregate This Election: \$ 500
Business or Organization Name: RMGAN SMITH ASSOC. OR
First Name: Middle Name: Last Name: Welch
Address: 315 Wood Card St City: Nashville State: 7N Zip Code: 37206
Occupation: Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 2/2/24 Aggregate This Election: \$ 500
Amount of Continuation. 3 Date of Continuation Aggregate fins Election. 3
Business or Organization Name: OR
First Name: Middle Name: Last Name: BUGREE
Address: 390 B Douglass line City: Gallatin State: TN Zip Code: 37166
Occupation: Concrete Employer: Garrott Bro's
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$\\\\ 250\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Business or Organization Name: OR
First Name: Last Name: Last Name:
Address: 821 Longboat Dr City: Gallatin State: 7N Zip Code: 37066
Occupation: Afformy Employer: Bakw Nonelson
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 52.05 Date of Contribution: $2/14/24$ Aggregate This Election: \$ 52.05
(200 0)
Total Contributions: \$ 6398.06
(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.)
amount must be shown in the summary on mist page.)

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Candidate or Committee N	Name: Greg Hours	
2. Reporting Period: Start D	Date: 1/14/24 End Date: 2/24/24	1
	ons from preceding page (enter \$0 if first page) \$	1000
, ,		
COMPLETE THE APPROPRIAT	E ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
Business or Organization Na	me:	OF
First Name: MIKE	Middle Name:	Last Name: 上げい
Address: 1447 Ru	stella way City: <u>Gallatin</u>	State: 7N Zip Code: 37066
Occupation: SHCES	Employer: Avtones	<u> </u>
Contribution Received For:	Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$	100 Date of Contribution: 2/17/24	Aggregate This Election: \$ _/00 _
Business or Organization Na	me:	OF
	Middle Name:	
Address: 76/ Plantat	ion Blod City: <u>Gallalia</u>	State: <u>TN</u> Zip Code: <u>37066</u>
Occupation: <u>netit</u>	Employer: <u>retinea</u>	1
Contribution Received For:	Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$_	500 Date of Contribution: 2/8/24	Aggregate This Election: \$
Business or Organization Na	me:	OF
	Middle Name:	
Address:	City:	State: Zip Code:
Occupation:	Employer:	1 10 2
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:	OF
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: \$
	bage if additional pages of this form are used. If the summary on first page.)	his is the last page of contributions, this

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Greg Hollis	
2. Reporting Period: Start Date: End Date:	
3. Total campaign expenditures from preceding page (enter \$0 if first pa	4
COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expending contribution to a candidate, please remember to include the purpose of the expenditure section.	ditures must be itemized. If the expenditure is an inditure (e.g., postage, printing, etc.) along with the
Business or Organization Name: White OAK	OR
First Name: Middle Name:	Last Name:
Address: City:	State: Zip Code:
Purpose of Expenditure: Mailer #1	
Amount of Expenditure: \$	1/16/24
Business or Organization Name:	OR
First Name: Middle Name:	
Address:City:	
Purpose of Expenditure: Was Double Charged on WINRO	
Amount of Expenditure: \$ Date of Expenditure:	
Business or Organization Name: FOXLAND C.C.	OR
First Name: Middle Name:	
Address: City: GAURTIN	
Purpose of Expenditure: Meet / Greet	State. <u>17.1</u>
Amount of Expenditure: \$ 570.00 Date of Expenditure:	1/25/24
Business or Organization Name: Long's	OR
First Name: Middle Name:	
Address: City: Gallati	State: 7N Zip Code:
Purpose of Expenditure: Sign Posts	
Amount of Expenditure: \$ 67.54 Date of Expenditure:	1/26/24
Business or Organization Name: Mr Sign Man	OR
First Name: Middle Name:	
Address: City:	
Purpose of Expenditure: Signs + Magnets	State zip code
Amount of Expenditure: \$ 1927. \$ Date of Expenditure:	1/31/24
Total Expenditures: \$ 4070, 78	
(Carry forward to the next page if additional pages of this form are used. amount must be shown in the summary on first page.)	. If this is the last page of expenditures, this

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name:	area HOLLIS		
2. Reporting Period: Start Date:	4 End Date: 2/24/24		
3. Total campaign expenditures from preced		40-	10.78
COMPLETE THE APPROPRIATE ITEMS FOR EAkind contribution to a candidate, please remember to candidate's name in the purpose of the expenditure s	include the purpose of the expenditure (e.g.,	e t be itemized. Dostage, printin	If the expenditure is an in- g, etc.) along with the
Business or Organization Name:	Lowe's		OR
First Name: M			
Address:	City:	State: 70	Zip Code:
Purpose of Expenditure: Sign Po			
Amount of Expenditure: \$65,33	Date of Expenditure: Z	13/24	
Business or Organization Name:	THEAN Promotions		OR
First Name: M			
Address:	City:	State:	Zip Code:
Purpose of Expenditure:	shivts	,	,
Amount of Expenditure: \$	Date of Expenditure:	8/24	
Business or Organization Name:	x Printing + Mailing		OF
First Name: M			
Address:	City: !	State:	Zip Code:
Purpose of Expenditure:	ler #2		
Purpose of Expenditure: Mai	Date of Expenditure: 2	13/24	
Business or Organization Name:			OF
First Name: M	iddle Name:	Last Name:	
Address:	City: !	State:	Zip Code:
Purpose of Expenditure:			
Amount of Expenditure: \$	Date of Expenditure:		_
Business or Organization Name:			OF
First Name: M	iddle Name:	Last Name:	
Address:	City:	State:	Zip Code:
Purpose of Expenditure:			
Amount of Expenditure: \$	Date of Expenditure:		
Total Expenditures: \$ 575/.17 (Carry forward to the next page if additional amount must be shown in the summary on	pages of this form are used. If this is the	ne last page	of expenditures, this

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