

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
					Amount	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)						
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name <i>Tim</i>		Middle Name		Contribution Received For:		Amount of Contribution <i>\$500</i>
Last Name/Organization Name <i>Hardin</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address <i>3723 City Hwy 30A</i>						
City <i>Santa Rosa</i>		State <i>FL</i>	Zip Code <i>32459</i>	Date of Contribution <i>5/5</i>		Aggregate This Election <i>\$500</i>
Occupation <i>Jeweler</i>						
Employer <i>Self</i>						
First Name		Middle Name		Contribution Received For:		Amount of Contribution <i>\$500</i>
Last Name/Organization Name <i>TN Realtors</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address <i>901 19th Ave S</i>						
City <i>Nashville</i>		State <i>TN</i>	Zip Code <i>37212</i>	Date of Contribution <i>5/19</i>		Aggregate This Election <i>\$500</i>
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address						
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
Employer						
5. TOTAL ITEMIZED CONTRIBUTIONS						
<small>(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)</small>						

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD		
			FROM:	TO:	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name				<i>Marketing</i>	150
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name				<i>Shirts</i>	\$299.62
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name				<i>Strawberry Parade Candy</i>	231.84
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name				<i>Strawberry Parade</i>	#70
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name			
5. TOTAL ITEMIZED EXPENDITURES					
(Carry forward to item 3. of next page if additional pages of this form are used.)					
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					