CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

| 1. E | DATE OF REPORT | 2.a. NAMEO | OF CANDIDATE OF | COMMETTEE | | |
|--|--|---|-------------------------------------|-------------------------|---------------------------|---|
| 1 - | 7/27/72 | 1 7) | 1 . | <i>1</i> | | |
| 2.b. l | IF COMMITTEE, NAME OF CANDIDATE | 1 | AUID K | LEIN | 1 | · · · · · · · · · · · · · · · · · · · |
| | COMMITTEE, MARIE OF CARDIOTIE | | | | 3. ELECTION DAT | 22 |
| | CAMPAIGN ADDRESS AND PHONE | | | | | |
| S | Street or Rural Route | City | | State | Zip Code | Phone |
| 4.b. C | CANDIDATE'S HOME ADDRESS (if different | ent than 4.a.) | | | | |
| 39 | Branham Mill | RA. Gal | Notin | State | Zip Code 3 70 66 | Phone 615-504-403 |
| 5. O | OFFICE SOUGHT (include district number, | if applicable) | 6. NAME | OF POLITICAL | L TREASURER (may b | |
| Con | ent Commission Date | rict 6 | 7 | David | Khin | , |
| 7. C | CATEGORY OR REPORT (Check one) | П | | | - | |
| _ | FIRST SECOND THERD | FOURTH | PRE- | PRE- | ☐ MID-YEAR | YEAR-END |
| | QUARTER QUARTER QUARTER EGINNING DATE OF REPORTING PERIOD | R QUARTER | | GENERAL GDATE OF REP | | · · · - |
| 7 | 7/1/22 | | 7 | 125/ | 27 | |
| 9. (Ch | neck one) | | | | | |
| a. | This campaign is exempt from details tures total \$1,000 or less for this repo | led disclosure bed | ause contribution | s (including in-l | kind) received total \$1, | 000 or less AND expendi- |
| 5 | | | | | • | |
| υ. | This campaign is required to file a de and/or expenditures total more than s | stailed financial dis \$1,000 for this rep | sclosure because porting period. | contributions (| including in-kind) recei | ved total more than \$1,000 |
| 10 1 | | | | | | |
| a | I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution | ions and expenditi | ures required to b | be reported by t | the candidate committe | o butto Compains |
| r | rinaricial disclosure Act. Additionally, I/we | e swear or affirm th | hat no campaion d | contributions ha | ave been expended for | e by the Campaign the personal financial |
| | benefit of the candidate or for any other nor | npolitical purpose | as defined by the | : federal interna | al revende dode. | · |
| </td <td>Ind V</td> <td>7/27/</td> <td>121</td> <td></td> <td>2(/)</td> <td>7/17/11</td> | Ind V | 7/27/ | 121 | | 2(/) | 7/17/11 |
| | signature of candidate | date | | signature | of political treasurer | |
| | | | | | or pondour dedours. | uate |
| 11. W | MTNESS SIGNATURE | | | .1 | | |
| \mathcal{W}_{l} | I len and the | 7/2- | / _ | _ | OSVa. | - 4- |
| | way for | 1/27 | 122 / | × aug | X J. Alen | 4-27-22 |
| | signature of witnes | 'date | . <u></u> _ | signa | ature of witness | date |
| 12. SU | JMMARY | | | | | |
| a. | BALANCE ON HAND LAST REPORT | R | ECEIVE! | D | 1,294. | 24 |
| b. | TOTAL RECEIPTS THIS PERIOD | | JUL 28 202 | 7 | s 1,000.14 | 21 |
| C. | TOTAL DISBURSEMENTS THIS PERIOD. | | . | TY | s <u>825.14</u> | t |
| d. | BALANCE ON HAND (12.a. plus 12.b. m | ninus 12.c.) .ELE(| STION COMMIS | SION | | s 1,469.11 |
| е. | TOTAL LOANS OUTSTANDING | | | | | s 5,000.00 |
| f. | TOTAL OBLIGATIONS OUTSTANDING | | | | | s |
| | | | | | | ı |



SUMMARY PAGE - CANDIDATE

| 13. NAME OF CANDIDATE OR COMMITTEE (In Full) | 14. REPORT COVERING THE PERIOD |
|--|---------------------------------------|
| LAVID KLEIN | FROM: 7/1/22 TO: 7/25/22 |
| RECEIPTS 15. CONTRIBUTIONS (other than loans and interest) | |
| a. Uniternized Contributions (\$100 or less from each source this period) | \$ |
| b. Itemized Contributions (over \$100 from each source this period) | \$ |
| c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) | · · · · · · · · · · · · · · · · · · · |
| 16. LOANS RECEIVED THIS REPORTING PERIOD | \$ <u>1,000.00</u> |
| 17. INTEREST RECEIVED THIS REPORTING PERIOD | |
| 18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) | \$ <u>1,000.01</u> |
| DISBURSEMENTS | |
| 19. EXPENDITURES (other than loan payments) | |
| a. Expenditures (\$100 or less each payee this period) (must be listed by category - e | g., printing, postage, gasoline) |
| \$ | |
| \$ | |
| <u> </u> | |
| \$ | |
| | _ |
| * | |
| | |
| <u> </u> | |
| <u> </u> | |
| \$ | |
| Total of Expenditures (\$100 or less each payee) | .s <u>0</u> |
| b. Itemized Expenditures (Over \$100 each payee this period) | |
| c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) | \$ 825.14 |
| 20. LOAN REPAYMENTS MADE THIS PERIOD | |
| 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) | \$ 825.14 |
| 22.IN-KIND CONTRIBUTIONS | |
| a. Unitemized in-kind contributions (\$100 or less from each source this period) | \$ |
| b. Itemized in-kind contributions (over \$100 from each source this period) | \$ |
| c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b. | s |
| 23. OBLIGATIONS | |
| a. Uniternized Obligations Outstanding (\$100 or less each) | .\$ |
| b. Itemized Obligations Outstanding (Over \$100 each) | .\$ |
| c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item | 12.f.)s |

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| 1. NAME OF SANDIDATE OR COMMITTEE | | | | 2. REPORT COVER | RING THE PERIOD | |
|---|-------------------------------------|--------------------------|-----------------------------------|------------------------|-------------------------|--|
| JAVID KLEIN | 10:7/25/22 | | | | | |
| | Amount | | | | | |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT | IONS FRO | OM PRECEDING PAC | SE (enter \$0 if first itemized p | age) | | |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EA | contributions totaling more than \$ | 100 from any contributor |) | | | |
| First Name | Middle Nam | ne | Contribution Received For: | Amount of Contribution | | |
| Last Name/Organization Name | l . | | ☐ Primary Election ☐ | General Election | | |
| Address | | | Runoff (Local Election | | | |
| City | State Zip Code | | | Date of Contribution | | |
| Occupation | L | | | | | |
| Employer | | | | | | |
| | | | | | | |
| First Name | Middle Nan | ne | Contribution Received For: | | Amount of Contribution | |
| Last Name/Organization Name | | | Primary Election | General Election | | |
| Address | | | Runoff (Local Election | s Only) | | |
| City | Zip Code | Date of Contribution | Aggregate This Election | | | |
| Occupation | 1 | | | | | |
| Employer | | | | | | |
| | | | | | | |
| First Name | Middle Nam | e | Contribution Received For: | Amount of Contribution | | |
| Last Name/Organization Name | 1 | | Primary Election | General Election | | |
| Address | | | Runoff (Local Election | | | |
| City | State | Zip Code | Date of Contribution | | Aggregate This Election | |
| Occupation | | | | | | |
| Employer | | | | | | |
| First Name | Middle Nam | | Contribution Received For: | | Amount of Contribution | |
| | HINNE (VAII) | ~ | COMMENSACIA NOCIONALE FUI. | Amount of Continoution | | |
| Last Name/Organization Name | | | Primary Election | General Election | | |
| Address | | | Runoff (Local Election | s Only) | | |
| City | State | Zip Code | Date of Contribution | | Aggregate This Election | |
| Occupation | | | | | | |
| Employer | | | | | | |
| TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of (If this is the last page of contributions, this amount must be a contribution of the contribution.) | | | | | 0 | |

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

| 1. NAME OF CANDIDATE OR CO | MMITTEL | _ | | RING THE PERIOD | | | | | |
|--|--------------------------|-----------------------------------|---|---|-------------------------------|--|--|--|--|
| ANIO | F-4 | E/N | | TO: 7/25/27 | | | | | |
| | • | | · (| Amount | | | | | |
| 3. TOTAL ITEMIZED IN-KIND COM | | | <u> </u> | <u>'</u> | | | | | |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period) | | | | | | | | | |
| First Name | Mid | dle Name | In-Kind Contribution Receive | Value of In-Kind Contribution | | | | | |
| Last Name/Organization Name | | | | ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only) | | | | | |
| Address | ·- ·- | · | Date of In-Kind Contribution | | | | | | |
| City | Stat | e Zip Code | Description of In-Kind Contribution | Description of In-Kind Contribution | | | | | |
| Occupation | Employer | | | | | | | | |
| First Name | Mid | dle Name | In-Kind Contribution Receive | | Value of In-Kind Contribution | | | | |
| Last Name/Organization Name | I . | | ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only) | | | | | | |
| Address | | | Date of In-Kind Contribution | на опуј | Aggregate this Election | | | | |
| City | Star | te Zip Code | Description of In-Kind Contribution | | <u></u> | | | | |
| Occupation | Employer | | 1 | | | | | | |
| | | | | | | | | | |
| First Name | Mid | dle Name | In-Kind Contribution Receive | d For: General Election | Value of in-Kind Contribution | | | | |
| Last Name/Organization Name | | | Runoff (Local Electio | ns Only) | | | | | |
| Address | | | Date of In-Kind Contribution | | Aggregate this Election | | | | |
| City | Star | te Zip Code | Description of In-Kind Contribution | | | | | | |
| Occupation | Employer | | | | | | | | |
| First Name | l usa | dle Name | to Kind Contribution December | od Fore | Value of la Kind Continuin | | | | |
| First Name | Mic | ale Name | In-Kind Contribution Received Primary Election | General Election | Value of In-Kind Contribution | | | | |
| Last Name/Organization Name | | | Runoff (Local Elections Only) | | | | | | |
| Address | | | Date of In-Kind Contribution | Aggregate this Election | | | | | |
| City | Stat | te Zip Code | Description of In-Kind Contribution | | | | | | |
| Occupation | Employer | | | | | | | | |
| First Name | Midd | ile Name | In-Kind Contribution Receiv | ed For: | Value of In-Kind Contribution | | | | |
| Last Name/Organization Name | | | 7 - | General Election | | | | | |
| Address | | | ☐ Runoff (Local Election Date of In-Kind Contribution | ns Only) | Aggregate this Election | | | | |
| City | State | Zip Code | Description of In-Kind Contribution | | | | | | |
| Occupation | Employer | <u> </u> | | | | | | | |
| | | | | | | | | | |
| 5. TOTAL ITEMIZED IN-KIND CC (Carry forward to item 3, of next page if a | additional pages of this | | | | | | | | |
| (If this is the last page of in-kind contribu | tions, this amount mus | st be shown in item 22b, of summa | | e_4_of_7 | | | | | |
| SS-1128 (Rev. 2/06) Page of RDA 1159 | | | | | | | | | |

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

| 1) | win K | I EIXI | | RING THE PERIOD | | |
|--|---|---|---|--|--|--|
| 3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | | | | |
| | | | | eriod) | | |
| Middle Name | | | | Amount of Expenditure | | |
| 1 | | Mailers | | \$825.14 | | |
| | | | | | | |
| State Zip Code | | | | | | |
| Middle Na | me | Pumose of Eynenditure | | Amount of Expenditure | | |
| Wildus Na | | 1 dipose of experiolities | | Amount of Experiuntile | | |
| | | | | | | |
| | , | | | | | |
| State | Zip Code | | | | | |
| Middle Na | me | Purpose of Expenditure | | Amount of Expenditure | | |
| <u> </u> | | | | | | |
| | | | | | | |
| Address City State Zip Code | | | | | | |
| | | | | | | |
| First Name Middle Name | | | | Amount of Expenditure | | |
| • | | | | | | |
| | | | | | | |
| State | Zip Code | | | | | |
| 1644-11- | | Duman of Firm with us | | A | | |
| Miloule Nan | ne | - Fulpose of Expenditule | | Amount of Expenditure | | |
| | | | | | | |
| | | | | | | |
| State | Zip Code | | | | | |
| Middle Name | | | | Amount of Expenditure | | |
| 1 | | 7 | | | | |
| | | _ | | | | |
| City State Zip Code | | | | | | |
| <u> </u> | | | | И | | |
| | | | | #825.14 | | |
| | State Middle Na State | JRES FROM PRECEDING PAEACH ITEMIZED EXPENDITURE Middle Name State Zip Code Middle Name | JRES FROM PRECEDING PAGE (enter \$0 if first itemized page (expenditures totaling more than \$10 Middle Name Purpose of Expenditure Was less as a state of Expenditure Purpose of Expenditure Purpose of Expenditure Purpose of Expenditure State Zip Code Purpose of Expenditure State Zip Code Purpose of Expenditure Purpose of Expenditure State Zip Code Purpose of Expenditure Purpose of Expenditure State Zip Code Purpose of Expenditure Purpose of Expenditure State Zip Code Purpose of Expenditure Purpose of Expenditure State Zip Code Purpose of Expenditure State Zip Code Purpose of Expenditure State Zip Code Purpose of Expenditure Purpose of Expenditure State Zip Code | JRES FROM PRECEDING PAGE (enter \$0 if first itemized page) ACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the p Middle Name Purpose of Expenditure Middle Name Purpose of Expenditure State Zip Code Middle Name Purpose of Expenditure | | |

ITEMIZED STATEMENT OF LOANS - CANDIDATE

| NAME OF CANDIDATE OR COMMITTEE | | | | | 2. REPORT COVERING THE PER | | | · · · · · · · · · · · · · · · · · · | | | |
|--|-------------------------------|-------------|-------------|--------------|---|-------------------------------|-------------------|-------------------------------------|--------|---|--|
| 1) AUIO | | | | 7 | OM: /2 | Z | TO: 7/25/22 | | | | |
| 3. COMPLETE THE APPROPRIA | ATE ITEMS F | OR EACH I | TEMIZ | 'ED LOAN (| loans totaling | nore than \$10 | 0 from any source | e during the pe | riod) | | |
| Complete the Following for the Source of the Loan | | | | | | | | | | | |
| | | | | | g of Period) Received Payments (End of Period) | | | | | standing Loan Balance (End of Period) | |
| Last Narpe/Organization Name | | | | | 000 | \$1,00 | 0.0 | 9 | 15 | 5,000.00 | |
| 319 Branham Mill RI. Loan Receiv | | | | | | | | | | | |
| City Carllatin | State Zip Code | | | | ary Election General Election 7/12/22 #f (Local Elections Only) | | | | | 122 | |
| | List All Endor | | | or Above Loa | n (If more sp | ace is neede | d please attacl | n a page) | | | |
| First Name | | Middle Name | 9 | | First Name | | | | Middle | Name | |
| Last Name/Organization Name | | <u> </u> | | | Last Name/O | ganization Na | me | | | · | |
| Address | | . | | | Address | | | | | | |
| City | | State | Zip C | ode | City | | | | | Zip Code | |
| Amount Guaranteed Outstanding | | | · | | Amount Guaranteed Outstanding | | | | | | |
| First Name | | Middle Name |) | | First Name Middle Name | | | | | | |
| Last Name/Organization Name | | - L | | | Last Name/Organization Name | | | | | | |
| Address | | | | | Address | | | | | | |
| City | | State | Zip C | ode | City | | | | | Zip Code | |
| Amount Guaranteed Outstanding | | | | | Amount Guara | anteed Outstar | nding | | | | |
| First Name | | Middle Name |) | | First Name | | | | Middi | e Name | |
| Last Name/Organization Name | · | | | | Last Name/Or | ganization Na | me | | 1 | 117 202 | |
| Address | | | | | Address | | | | | | |
| City | | State | Zip Co | ode | City | | | | | Zip Code | |
| Amount Guaranteed Outstanding | | <u></u> | | | Amount Guaranteed Outstanding | | | | | | |
| First Name | | Middle Name | } | | First Name Middle Name | | | | | Name | |
| Last Name/Organization Name | | | | | Last Name/Organization Name | | | | | | |
| Address | | | | | Address | | | | | | |
| City | | State | Zip Co | ode | City | | | | State | Zip Code | |
| Amount Guaranleed Outstanding | Amount Guaranleed Outstanding | | | | | Amount Guaranteed Outstanding | | | | | |
| Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) | | | | | Outstanding L (Beginning | | Loans Received | Loar Paym | | Oulstanding Loan Balance (End of Period) | |
| (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.) | | | | | | | | | | | |



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

| 1. NAME OF CANDIDATE OR COMMITTEE | | ······································ | 2. REPORT COVERING THE PERIOD | | | | |
|--|--|--|-------------------------------|--|----------|----------|--|
| 3. COMPLETE THE APPROPRIATE ITEMS FOR OBLIGATION (obligations totaling more that person/vendor at the end of the reporting p | Outstanding Balance (Beginning of Period) | FROM: 7 Debt Incurred This Period | Payments This Period | Outstanding Balance (End of Period) | | | |
| First Name | Middle Na | me | | | | | |
| Last Name/Business Name | 1 | | | | | | |
| Address | | | | | | | |
| City | State Zip Code | | | | | | |
| Description of Obligation | <u> </u> | <u> </u> | | <u> </u> | <u> </u> | <u>L</u> | |
| First Name | Middle Na | me | *** <u>;.</u> . | | | | |
| Last Name/Business Name | 1 | | _ | | | | |
| Address | | | | | | | |
| City | State | Zip Code | | | | | |
| Description of Obligation | <u> </u> | <u>.l</u> | | 1 | | | |
| First Name | t Name Middle Name | | | | | | |
| Last Name/Business Name | | | | | | | |
| Address | | | | | | | |
| City | State Zip Code | | 1 | | | | |
| Description of Obligation | | | | <u> </u> | | | |
| First Name | Middle Na | me | | | | | |
| Last Name/Business Name | 1 | | | | | | |
| Address | • | | | | | | |
| City | State | Zip Code | | | | | |
| Description of Obligation | <u> </u> | | | <u> </u> | | | |
| First Name | Middle Nai | ne | | · | | | |
| Last Name/Business Name | i | | - | | | | |
| Address | | | | | | | |
| City | State | Zip Code | | | | | |
| Description of Obligation | I | | | | | <u> </u> | |
| 4. TOTALS (Total from Outstanding Balance - (End of Period) c | olumn mus | also be shown | | | | | |
| in item 23b. on summary page.) | | | | | | | |