



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 2-24-24 2.a. Candidate or Committee Name: Wade Evans
 2.b. If Committee, Name of Candidate: _____ 3. Election Date: March 5, 2024
 4. Campaign Address: 1016 Hillwood Ct.
 City: Hendersonville State: IN Zip Code: 37015 Phone: _____
 5. Candidate Home Address: Same
 City: _____ State: _____ Zip Code: _____ Phone: _____
 Candidate Email Address: _____
 6. Office Sought: (include district number, if applicable) School Board District 4
 7. Name of Political Treasurer (may be candidate): Sarah Andrews
 Political Treasurer Email Address: SARAH.ANDREWS111@GMAIL.COM

8. Category or Report: (check one)

- First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 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.

[Signature] 2/26/24
 Candidate Signature Date

Sarah Andrews 2-24-24
 Political Treasurer Signature Date

[Signature] 2/26/24
 Witness Signature Date

[Signature] 2-24-24
 Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$	5970.29 5970.29
b. Total Receipts This Period	\$	10949.00
c. Total Disbursements This Period	\$	5858.73
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	7060.56
e. Total Loans Outstanding	\$	0
f. Total Obligations Outstanding	\$	0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Wade Evans

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) \$ 349
(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) \$ 6600
- 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.) \$ 6949

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 5858.73
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- 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.)..... \$ 5858.73

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 100.00
- b. Itemized In-Kind Contributions Received This Period \$ _____
- c. Total In-Kind Contributions Received This Period \$ 100.00

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Wade Evans
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) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Derrick Middle Name: _____ Last Name: Romnes
Address: 116 Wainlands Dr. City: Gardlettsville State: TN Zip Code: 37072
Occupation: underwriter Employer: Frankenmuth
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1-18-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Debra Middle Name: _____ Last Name: Maggart
Address: 112 La Bar Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: policy advisor Employer: Nelson Mullins
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250 Date of Contribution: 1-19-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Grace Middle Name: _____ Last Name: Oliver
Address: 104 Liberty Ct. City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 1-22-24 Aggregate This Election: \$ 1000.00

Business or Organization Name: _____ OR
First Name: Tommy Middle Name: _____ Last Name: Whittaker
Address: P.O. Box 453 City: Portland State: TN Zip Code: 37148
Occupation: retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 1-22-24 Aggregate This Election: \$ _____

Total Contributions: \$ 1050

(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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Wade Evans
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) \$ 1050

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Charles Middle Name: _____ Last Name: Kimbrough
Address: 48 Wypdmere City: Hendersonville State: IN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Paul Middle Name: _____ Last Name: Decker
Address: 134 Meadowvue City: Hendersonville State: IN Zip Code: 37075
Occupation: Retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 1-26-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Chris Middle Name: _____ Last Name: Collins
Address: 1575 Hunt Club City: Gallatin State: IN Zip Code: 37066
Occupation: IT Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 400 Date of Contribution: 1-26-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Sarah Middle Name: _____ Last Name: Andrews
Address: 1011 Forest Pointe City: Hendersonville State: IN Zip Code: 37075
Occupation: receptionist Employer: Dr. Andrew Cox
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1-26-24 Aggregate This Election: \$ 200

Total Contributions: \$ 1950

(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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Wade Evans
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) \$ 1950

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Jeremy Middle Name: _____ Last Name: Andrews
Address: 1011 Forestpointe City: Hendersonville State: TN Zip Code: 37075
Occupation: Cable splicer Employer: NES
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1-26-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Diane Middle Name: _____ Last Name: Black
Address: 1254 Wavercrest Cir. City: Gallatin State: TN Zip Code: 37066
Occupation: retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1000 Date of Contribution: 2-1-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Mark Middle Name: _____ Last Name: Evans
Address: 156 Drake's Creek Rd City: Hendersonville State: TN Zip Code: 37075
Occupation: CEO Employer: Red Cross
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 300 Date of Contribution: 2-1-24 Aggregate This Election: \$ 600

Business or Organization Name: _____ OR
First Name: Ken Middle Name: _____ Last Name: Dannen
Address: 135 Saranac Trail City: Hendersonville State: TN Zip Code: 37075
Occupation: lawyer Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 2-8-24 Aggregate This Election: \$ _____

Total Contributions: \$ 3450

(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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Wade Evans
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) \$ 3450

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Jeff Middle Name: _____ Last Name: Derryberry
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: Self-employed Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 300 Date of Contribution: 2-8-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: George Middle Name: _____ Last Name: Welch
Address: 315 Woodland St. City: Nashville State: TN Zip Code: 37206
Occupation: _____ Employer: Ragan Smith Assoc.
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 2-2-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Steve Middle Name: _____ Last Name: Fields
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 2-5-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Jim Middle Name: _____ Last Name: Hamson
Address: 1659 Boardwalk Pl. City: Gallatin State: TN Zip Code: 37066
Occupation: Civil engineer Employer: CSDG
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 2-4-24 Aggregate This Election: \$ _____

Total Contributions: \$ 5250

(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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Wade Evans
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) \$ 5250

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Lynn Middle Name: _____ Last Name: Ealey
Address: 2925 Bury Hill Dr. City: Nashville State: TN Zip Code: 37204
Occupation: COO Employer: Land Solutions Company
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 2-5-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Daniel Middle Name: _____ Last Name: Bugbee
Address: 3903 Douglas Ln. City: Gallatin State: TN Zip Code: 37066
Occupation: _____ Employer: Garrott Bros
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250 Date of Contribution: 2-15-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Alvin Middle Name: _____ Last Name: Hale
Address: 716 Plantation Blvd City: Gallatin State: TN Zip Code: 37066
Occupation: Self-employed Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ ~~250~~ 500 Date of Contribution: 2-15-24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Jennifer Middle Name: _____ Last Name: Nichols
Address: 1226 Twelve Stones City: Goodlettsville State: TN Zip Code: 37072
Occupation: Attorney crossings Employer: State of TN
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 2-13-24 Aggregate This Election: \$ _____

Total Contributions: \$ 6600

(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Wade Evans
2. Reporting Period: Start Date: 1-16-24 End Date: 2-24-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Mr. Signman OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Magnets
Amount of Expenditure: \$ 54.63 Date of Expenditure: 1-16-24

Business or Organization Name: Capitol Promotions OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Signs
Amount of Expenditure: \$ 1294.00 Date of Expenditure: 1-17-24

Business or Organization Name: Fox Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: mailer
Amount of Expenditure: \$ 639.90 Date of Expenditure: 1-17-24

Business or Organization Name: WinRed OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Processing fee
Amount of Expenditure: \$ 3.94 Date of Expenditure: 1-18-24

Business or Organization Name: ASAP Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Thank you cards & envelopes
Amount of Expenditure: \$ 96.69 Date of Expenditure: 1-19-24

Total Expenditures: \$ 2089.16

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Wade Evans
2. Reporting Period: Start Date: 1-16-24 End Date: 2-24-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 2089.16

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Pink Truck OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Neighbourhood meet & greet

Amount of Expenditure: \$ 250 Date of Expenditure: 1-29-24

Business or Organization Name: Fox Printing OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Mailer

Amount of Expenditure: \$ 906.35 Date of Expenditure: 2-1-24

Business or Organization Name: Mr. Signman OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Signs

Amount of Expenditure: \$ 147.49 Date of Expenditure: 2-1-24

Business or Organization Name: Mini Donut Daze OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Neighborhood meet & greet

Amount of Expenditure: \$ 304.00 Date of Expenditure: 2-2-24

Business or Organization Name: Koretha Drive Designs OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Sweat shirts

Amount of Expenditure: \$ 48.33 Date of Expenditure: 2-5-24

Total Expenditures: \$ ~~2089.16~~ 3855.33

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Wade Evans
2. Reporting Period: Start Date: 1-16-24 End Date: 2-24-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3855.33

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: WimPed OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Processing fee

Amount of Expenditure: \$ 39.40 Date of Expenditure: 2-5-24

Business or Organization Name: Mr. Signman OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Signs

Amount of Expenditure: \$ 229.43 Date of Expenditure: 2-7-24

Business or Organization Name: Southern Promotions OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Shirts

Amount of Expenditure: \$ 174.36 Date of Expenditure: 2-8-24

Business or Organization Name: ASAP Printing OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Push cards

Amount of Expenditure: \$ 293.88 Date of Expenditure: 2-8-24

Business or Organization Name: Tinwest BBQ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Neighborhood meet & greet

Amount of Expenditure: \$ 287.50 Date of Expenditure: 2-13-24

Total Expenditures: \$ 4879.90

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Wade Evans
2. Reporting Period: Start Date: 1/16/24 End Date: 2/24/24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 4879.90

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: UPS Store OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Stamps

Amount of Expenditure: \$ 33.60 Date of Expenditure: 2-15-24

Business or Organization Name: Ace Hardware OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Stamps

Amount of Expenditure: \$ 36.24 Date of Expenditure: 2-20-24

Business or Organization Name: Fox Printing OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: Mailer

Amount of Expenditure: \$ 908.99 Date of Expenditure: 2-20-24

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: _____

Amount of Expenditure: \$ _____ Date of Expenditure: _____

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: _____

Amount of Expenditure: \$ _____ Date of Expenditure: _____

Total Expenditures: \$ 5858.73

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Wade Evans
2. Reporting Period: Start Date: 1/16/24 End Date: 2/24/24
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: _____ **OR**
First Name: Stephen Middle Name: _____ Last Name: Sanders
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$100 In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: BRUSTER'S ICE CREAM

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ _____

(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)