

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

| 1. Date: 2-325 2.a. Candidate or Committee Name: Campaign to Elect Holly Cruz | | |
|---|--|--|
| 2.b. If Committee, Name of Candidate: Holy CM2 3. Election Date: | | |
| 4. Campaign Address: 3275 Hartsulle Pike | | |
| City: Castalian Springs State: TV Zip Code: 3703/ Phone: 615-502-491 | | |
| 5. Candidate Home Address: 3275 Harshile Ake | | |
| City: Castalian Sphng State: The Zip Code: 37031 Phone: Las-502-049 Candidate Email Address: holly CM2 for TNO gmail com | | |
| 6. Office Sought: (include district number, if applicable) Sumper County School Board District 9 | | |
| 7. Name of Political Treasurer (may be candidate): Samantha washing to | | |
| Political Treasurer Email Address: (SISam a 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 ☐ Runoff Election | | |
| 9. Reporting Period: Start Date: 101-2024 End Date: 1-15-2025 | | |
| 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 2-3-25 Candidate Signature Date Date Date | | |
| Witness Signature Date Political Treasurer Signature U Date 2 3 25 Witness Signature Date | | |
| Witness Signature Date Witness Signature Date | | |
| 12. Summary: | | |
| a. Balance On Hand Last Report | | |
| b. Total Receipts This Period | | |
| c. Total Disbursements This Regiod | | |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | | |
| e. Total Loans Outstanding MMISSION \$ | | |
| f. Total Obligations Outstanding \$\$ | | |

SUMMARY PAGE - CANDIDATE

| 13. Na | ame of Candidate or Committee: Oumpaugn to Elect Holly Cuz | |
|---|---|--|
| 14. Reporting Period: Start Date: 101-24 End Date: 115-25 | | |
| 15. Receipts: | | |
| a. | Unitemized Contributions (\$100 or less from each source this period) | |
| b. | Itemized Contributions (over \$100 from each source this period)\$ | |
| 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. Disbursements: | | |
| 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. In-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.)\$ | |