



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 10-25-24 2.a. Candidate or Committee Name: Charles d Cole

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 11-5-24

4. Campaign Address: _____
 City: _____ State: _____ Zip Code: _____ Phone: _____

5. Candidate Home Address: 439 Fowler Ford rd
 City: Portland State: TN Zip Code: 37148 Phone: (615) 561-0105

Candidate Email Address: Charles d Cole 615 @ yahoo.com

6. Office Sought: (include district number, if applicable) City Council - Portland

7. Name of Political Treasurer (may be candidate): _____
 Political Treasurer Email Address: _____

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: _____ End Date: _____

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.

Charles d Cole 10-25-24 _____
 Candidate Signature Date Political Treasurer Signature Date

[Signature] 10-25-24 _____
 Witness Signature Date Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	AM	PM	\$ _____
b. Total Receipts This Period			\$ _____
c. Total Disbursements This Period			\$ _____
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)			\$ _____
e. Total Loans Outstanding			\$ _____
f. Total Obligations Outstanding			\$ _____