



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 7-24-2024 2.a. Candidate or Committee Name: Campaign to Elect Holly Cruz

2.b. If Committee, Name of Candidate: Holly Cruz 3. Election Date: 8-1-2024

4. Campaign Address: 3275 Hartsville Pike

City: Castalian Springs State: TN Zip Code: 37031 Phone: 615-502-0491

5. Candidate Home Address: 3275 Hartsville Pike

City: Castalian Springs State: TN Zip Code: 37031 Phone: 615-502-0491

Candidate Email Address: hollycruz-tn@gmail.com

6. Office Sought: (include district number, if applicable) Sumner County School Board District 9

7. Name of Political Treasurer (may be candidate): Samantha Washington

Political Treasurer Email Address: CSISAM@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: 7-1-2024 End Date: 7-22-2024

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.

<u>Holly Cruz</u> Candidate Signature	<u>7-24-2024</u> Date	<u>Samantha Washington</u> Political Treasurer Signature	<u>7/24/24</u> Date
<u>[Signature]</u> Witness Signature	<u>7.24.24</u> Date	<u>[Signature]</u> Witness Signature	<u>7/24/24</u> Date

12. Summary:

a. Balance On Hand Last Report	FILED	AM	PM	\$ <u>4,068.96</u>
b. Total Receipts This Period				\$ <u>975.00</u>
c. Total Disbursements This Period	JUL 25 2024			\$ <u>3,900.13</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)				\$ <u>3,143.83</u>
e. Total Loans Outstanding	SUMNER COUNTY			\$ <u>0</u>
f. Total Obligations Outstanding	ELECTION COMMISSION			\$ <u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Campaign to Elect Holly Cruz

14. Reporting Period: Start Date: 7-1-2024 End Date: 7-22-2024

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 325.00
(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) \$ 650.00
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period..... \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 975.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 3,900.13
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period..... \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 3,900.13

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 0
- c. Total In-Kind Contributions Received This Period \$ 0

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Campaign to Elect Holly Cruz
2. Reporting Period: Start Date: 7-1-2024 End Date: 7-22-2024
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: Wes Middle Name: _____ Last Name: Dwenkel
Address: 321 Buffalo Run City: Goodlettsville State: TN Zip Code: 37072
Occupation: photographer Employer: self
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200.00 Date of Contribution: 7-9-2024 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Barry Middle Name: _____ Last Name: Walker
Address: 1012 Fox Glen City: Gallatin State: TN Zip Code: 37060
Occupation: not employed Employer: N/A
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 7-11-2024 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ OR
First Name: Manuel Middle Name: _____ Last Name: Lopez
Address: 1199 Gibbs Ln. City: Gallatin State: TN Zip Code: 37060
Occupation: not employed Employer: N/A
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200.00 Date of Contribution: 7-14-2024 Aggregate This Election: \$ 375.00

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

Total Contributions: \$ 650.00
(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: Campaign to Elect Holly Cruz
2. Reporting Period: Start Date: 7-1-2024 End Date: 7-22-2024
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: Tennessee Democratic Party OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4900 Centennial Blvd, Ste 300 City: Nashville State: TN Zip Code: 37209
Purpose of Expenditure: Vote Builder
Amount of Expenditure: \$ 100.00 Date of Expenditure: \$ 7-1-2024

Business or Organization Name: Facebook OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1 Hacker Way City: Menlo Park State: CA Zip Code: 94025
Purpose of Expenditure: Advertisement
Amount of Expenditure: \$ 25.00 Date of Expenditure: \$ 7-1-2024

Business or Organization Name: Facebook OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1 Hacker Way City: Menlo Park State: CA Zip Code: 94025
Purpose of Expenditure: Advertisement
Amount of Expenditure: \$ 35.00 Date of Expenditure: \$ 7-1-2024

Business or Organization Name: Squarespace OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8 Clarkson St. City: New York State: NY Zip Code: 10014
Purpose of Expenditure: Website
Amount of Expenditure: \$ 37.15 Date of Expenditure: \$ 7-8-2024

Business or Organization Name: Facebook OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1 Hacker Way City: Menlo Park State: CA Zip Code: 94025
Purpose of Expenditure: Advertisement
Amount of Expenditure: \$ 50.00 Date of Expenditure: \$ 7-8-2024

Total Expenditures: \$ 247.15

(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: Campaign to Elect Holly Cruz
2. Reporting Period: Start Date: 7-1-2024 End Date: 7-22-2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 247.15

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: Printing Etc. OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1411 S. Dickerson Rd. City: Goodlettsville State: TN Zip Code: 37072
Purpose of Expenditure: Signs
Amount of Expenditure: \$ 502.55 Date of Expenditure: \$ 7-11-2024

Business or Organization Name: Lowe's OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1301 Nashville Pike City: Gallatin State: TN Zip Code: 37060
Purpose of Expenditure: pvc pipe for sign poles
Amount of Expenditure: \$ 13.07 Date of Expenditure: \$ 7-12-2024

Business or Organization Name: Walmart OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1172 Nashville Pike City: Gallatin State: TN Zip Code: 37060
Purpose of Expenditure: early voting drinks, snacks for volunteers
Amount of Expenditure: \$ 91.47 Date of Expenditure: \$ 7-12-2024

Business or Organization Name: Lowe's OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 300 E. Main St City: Hendersonville State: TN Zip Code: 37075
Purpose of Expenditure: Stakes for signs
Amount of Expenditure: \$ 57.86 Date of Expenditure: \$ 7-15-2024

Business or Organization Name: Squarespace OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8 Clarkson St. City: New York State: NY Zip Code: 10014
Purpose of Expenditure: Website scheduling app
Amount of Expenditure: \$ 37.15 Date of Expenditure: \$ 7-15-2024

Total Expenditures: \$ 949.25

(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: Campaign to Elect Holly Cruz
2. Reporting Period: Start Date: 7-1-2024 End Date: 7-22-2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 949.25

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: Facebook OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1 Hacker Way City: Menlo Park State: CA Zip Code: 94025
Purpose of Expenditure: Advertisement
Amount of Expenditure: \$ 75.00 Date of Expenditure: \$ 7-15-2024

Business or Organization Name: Amazon OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 410 Terry Ave North City: Seattle State: WA Zip Code: 98109
Purpose of Expenditure: School supplies, decor for Back to School event
Amount of Expenditure: \$ 249.85 Date of Expenditure: \$ 7-17-2024

Business or Organization Name: Amazon OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 410 Terry Ave North City: Seattle State: WA Zip Code: 98109
Purpose of Expenditure: decor for Back to School event
Amount of Expenditure: \$ 102.23 Date of Expenditure: \$ 7-18-2024

Business or Organization Name: Direct One OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7213 Sandstone Ct. Ste 1 City: Winter Park State: FL Zip Code: 32792
Purpose of Expenditure: Mailer
Amount of Expenditure: \$ 1,1629.17 Date of Expenditure: \$ 7-19-2024

Business or Organization Name: Facebook OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1 Hacker Way City: Menlo Park State: CA Zip Code: 94025
Purpose of Expenditure: Advertisement
Amount of Expenditure: \$ 125.00 Date of Expenditure: \$ 7-19-2024

Total Expenditures: \$ 3,090.50

(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: Campaign to Elect Holly Cruz
2. Reporting Period: Start Date: 7-1-2024 End Date: 7-22-2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3090.50

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: Staples OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1012 Glenbrook Way City: Hendersonville State: TN Zip Code: 37075
Purpose of Expenditure: Signs for Back to School event
Amount of Expenditure: \$ 82.31 Date of Expenditure: \$ 7-22-2024

Business or Organization Name: Walmart OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1112 Nashville Pike City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: Bookbags for Back to School event
Amount of Expenditure: \$ 87.05 Date of Expenditure: \$ 7-22-2024

Business or Organization Name: Bealls OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1040B Nashville Pike City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: Bookbags for Back to School event
Amount of Expenditure: \$ 93.89 Date of Expenditure: \$ 7-22-2024

Business or Organization Name: Five Below OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 217 Indian Lake Blvd City: Hendersonville State: TN Zip Code: 37075
Purpose of Expenditure: Bookbags for Back to School event
Amount of Expenditure: \$ 406.08 Date of Expenditure: \$ 7-22-2024

Business or Organization Name: Facebook OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1 Hacker Way City: Menlo Park State: CA Zip Code: 94025
Purpose of Expenditure: Advertisement
Amount of Expenditure: \$ 125.00 Date of Expenditure: \$ 7-22-2024

Total Expenditures: \$ 3,884.83

(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: Campaign to Elect Holly Cruz
2. Reporting Period: Start Date: 7-1-2024 End Date: 7-22-2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3,884.83

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: Dollar General OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3100 Hartsville Pike City: Castalian Springs State: TN Zip Code: 37031
Purpose of Expenditure: colored pencils for Back to School event
Amount of Expenditure: \$ 15.30 Date of Expenditure: \$ 7-22-2024

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: \$ _____

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: \$ 3,900.13

(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.)