

DISCLOSURE OF CONSULTING SERVICES AND CAMPAIGN SERVICES

Tennessee Bureau of Ethics and Campaign Finance 404 James Robertson Parkway, Suite 104 Nashville, TN 37243 (615) 741-7959 Ethics.Counsel@tn.gov

This form must be used to disclose to the Tennessee Ethics Commission all compensation for consulting services and/or campaign services. Please read the instructions before completing this form. This form must be filed within five (5) days of entering into any contract for consulting services and/or campaign services. Failure to properly and timely submit the form may constitute either a Class A or a Class C misdemeanor pursuant to T.C.A. §§ 2-10-125, 126(d)

1. Form Informa	tion:				
Form Completed By:			dual Receiving Fee	☐ Individual/Entity Paying Fee	
New Disclosure	Form:	Yes	□No		
Form Period:	☐ 1st	Quarter	2nd Quarter	3rd Quarter	☐ 4th Quarter
the full name and	identity o	of any perso		•	87 (2022), the filer must disclose to or from the person making the
2. Disclosure of			-		
Name: <u>KOH</u> V	Myn F	arris	Position/ or	Title: Legislative	2 Assistant
Mailing Addres	is: <u>7</u>	114 Ch	ariotte Rike	Ap+ 620	
city: Nasv	71111c		State: TN	_ Zip Code: <u>37209</u>	
Phone: 615	686	7710	Email: <u>Kathr</u>	un mrarrisag	mail.com
3. Disclosure of)	· · · · · · · · · · · · · · · · · · ·
Name/Entity:	Dav	12 For	TN		
Mailing Addres	is: <u>151</u>	6BC	order Or		
city: Nash	Will		State: TN	_ Zip Code: 3120 C	}
					ublic Strategies. Com
Name of Perso	n Submit	ting Form f	for Entity: KAHV	ryn tanris	-
4. Contract and	-		. .	4,0.	
					Not to exceed \$350
Date(s) Service	s Render	ed: <u> </u>	4 6 - August	· ·	
Description of	Services:	brote	J SENICES +	Voter Conto	VC+
5. By my signatu	re belov	, I attest to	o the following:		
				5 and 126, submitting a E ect me to the penalties o	Disclosure of Consulting Services of perjury.
			d in this Disclosure of 0 on and belief.	Consulting Services form	n is true and correct to the best of
All	1			7-6-23	
Signature			Da	ate	