

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For Single-Measure Committees (SMC)

1. DATE OF REPORT 10/09/24		2. NAME OF COMMITTEE Green Lights for Nashville PAC													
2. SHORT NAME OF COMMITTEE (IF APPLICABLE)															
3. ADDRESS AND PHONE <div style="display: flex; justify-content: space-between;"> Street or Rural Route City State Zip Code Phone </div> 1 Vantage Way Suite C140 Nashville TN 37228 615-423-7037															
4. MEASURES SUPPORTED OR OPPOSED															
5.A. NAME OF POLITICAL TREASURER Jeff Morris			5.B. DATE APPOINTED 8/8/2024												
6. CATEGORY OR REPORT (Check one) <div style="display: flex; justify-content: space-around; font-size: small;"> <div><input type="checkbox"/> FIRST QUARTER</div> <div><input type="checkbox"/> SECOND QUARTER</div> <div><input checked="" type="checkbox"/> THIRD QUARTER</div> <div><input type="checkbox"/> FOURTH QUARTER</div> <div><input type="checkbox"/> PRE-PRIMARY</div> <div><input type="checkbox"/> PRE-GENERAL</div> <div><input type="checkbox"/> MID-YEAR SUPPLEMENTAL</div> <div><input type="checkbox"/> YEAR-END SUPPLEMENTAL</div> </div>															
7.A. BEGINNING DATE OF REPORTING PERIOD 7/23/2024		7.B. ENDING DATE OF REPORTING PERIOD 9/30/2024													
8. (Check one) A. <input type="checkbox"/> This committee 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. I do solemnly swear or affirm that the information contained in this statement is true and that the committee has complied with all applicable provisions of the Campaign Financial Disclosure Act. (Items 10d., 10e. and 10f must also be completed.) B. <input checked="" type="checkbox"/> This committee 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. I do solemnly swear or affirm that the information contained in this statement is true and that the following page(s) are a complete and accurate accounting of all contributions and expenditures required to be reported by political campaign committees by the Campaign Financial Disclosure Act. <div style="text-align: right; margin-top: 20px;"> <div style="display: flex; align-items: center; justify-content: flex-end;"> <div style="text-align: center; margin-right: 20px;"> signature of political treasurer </div> <div style="text-align: center;"> 10/28/2024 date </div> </div> </div>															
9. WITNESS SIGNATURE <div style="text-align: right; margin-top: 20px;"> <div style="display: flex; align-items: center; justify-content: flex-end;"> <div style="text-align: center; margin-right: 20px;"> signature of witness </div> <div style="text-align: center;"> 10/28/2024 date </div> </div> </div>															
10. SUMMARY <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. BALANCE ON HAND LAST REPORT</td> <td style="text-align: right; border-bottom: 1px solid black;">\$ 0</td> </tr> <tr> <td>b. TOTAL RECEIPTS THIS PERIOD</td> <td style="text-align: right; border-bottom: 1px solid black;">\$ 707,122.75</td> </tr> <tr> <td>c. TOTAL DISBURSEMENTS THIS PERIOD</td> <td style="text-align: right; border-bottom: 1px solid black;">\$ 542,342.55</td> </tr> <tr> <td>d. BALANCE ON HAND (10.a. plus 10.b. minus 10.c.)</td> <td style="text-align: right; border-bottom: 1px solid black;">\$ 77,688.45</td> </tr> <tr> <td>e. TOTAL LOANS OUTSTANDING</td> <td style="text-align: right; border-bottom: 1px solid black;">\$ 0</td> </tr> <tr> <td>f. TOTAL OBLIGATIONS OUTSTANDING</td> <td style="text-align: right; border-bottom: 1px solid black;">\$ 0</td> </tr> </table>				a. BALANCE ON HAND LAST REPORT	\$ 0	b. TOTAL RECEIPTS THIS PERIOD	\$ 707,122.75	c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 542,342.55	d. BALANCE ON HAND (10.a. plus 10.b. minus 10.c.)	\$ 77,688.45	e. TOTAL LOANS OUTSTANDING	\$ 0	f. TOTAL OBLIGATIONS OUTSTANDING	\$ 0
a. BALANCE ON HAND LAST REPORT	\$ 0														
b. TOTAL RECEIPTS THIS PERIOD	\$ 707,122.75														
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 542,342.55														
d. BALANCE ON HAND (10.a. plus 10.b. minus 10.c.)	\$ 77,688.45														
e. TOTAL LOANS OUTSTANDING	\$ 0														
f. TOTAL OBLIGATIONS OUTSTANDING	\$ 0														



SUMMARY PAGE - SMC

11. NAME OF COMMITTEE (In Full) <div style="text-align: center; font-weight: bold;">Green Lights for Nashville PAC</div>	12. REPORT COVERING THE PERIOD <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">FROM: 7/23/24</td> <td style="width: 50%;">TO: 9/30/24</td> </tr> </table>	FROM: 7/23/24	TO: 9/30/24
FROM: 7/23/24	TO: 9/30/24		

RECEIPTS
 13. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period)	\$ _____
b. Itemized Contributions (over \$100 from each source this period)	\$ 707,122.75
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)	\$ 707,122.75

 14. LOANS RECEIVED THIS REPORTING PERIOD\$ _____
 15. INTEREST RECEIVED THIS REPORTING PERIOD\$ _____
 16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.)\$ 707,122.75

DISBURSEMENTS
 17. EXPENDITURES (other than loan payments)

a. Unitemized Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)	
Facebook Digital Media	\$ 99.01
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee)\$ 99.01	
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 542,212.54
c. TOTAL EXPENDITURES (other than loan repayments)(add 17.a. and 17.b.)	\$ 542311.55

 18. LOAN REPAYMENTS MADE THIS PERIOD\$ _____
 19. TOTAL DISBURSEMENTS (add 17.c. and 18.) (must be shown in item 10.c.)\$ 542311.55

20.IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ 99.01
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ 87122.75
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.)	\$ 87,221.76

21.LOANS
 LOANS OUTSTANDING (must be shown in item 10.e.)\$ _____

22.OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each)	\$ _____
b. Itemized Obligations Outstanding (Over \$100 each)	\$ _____
c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown i item 10.f.)	\$ _____



ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE Green Lights for Nashville PAC			2. REPORT COVERING THE PERIOD FROM: 7/23/24 TO: 9/30/24	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)				
First Name	M.I.	Last Name/Organization Name Nashville Moves Action Fund	Amount of Contribution 620,000.00	
Address One Vantage Way Suite C140				
City Nashville	State TN	Zip Code 37228		
Occupation				
Employer				
First Name	M.I.	Last Name/Organization Name	Amount of Contribution	
Address				
City	State	Zip Code		
Occupation				
Employer				
First Name	M.I.	Last Name/Organization Name	Amount of Contribution	
Address				
City	State	Zip Code		
Occupation				
Employer				
First Name	M.I.	Last Name/Organization Name	Amount of Contribution	
Address				
City	State	Zip Code		
Occupation				
Employer				
First Name	M.I.	Last Name/Organization Name	Amount of Contribution	
Address				
City	State	Zip Code		
Occupation				
Employer				
5.TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 13b. of summary.)				620,000.00



ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE Green Lights for Nashville PAC			2. REPORT COVERING THE PERIOD FROM: TO:	
			Amount	
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (any expenditures totaling more than \$100 to a single payee during the period, must be itemized.)				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
		Television Media/Broadcast		529,725.00
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
		Digital Media		500.00
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
		Yard Signs		8655.36
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
		Yard Signs		2215.35
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
		Yard Signs & Promo Materials		1116.83
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of campaign expenditures, this amount must be shown in item 17b. of summary.)				542,212.54



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE Green Lights for Nashville PAC				2. REPORT COVERING PERIOD				
				FROM:	TO:			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount			
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)								
First Name		Middle Name		Description of In-Kind Contribution Phonebanking and Canvassing		Value of In-Kind Contribution 2685.00		
Last Name/Organization Name TIRRC Votes PAC								
Address 3310 Ezell Rd								
City Nashville		State TN					Zip Code 37211	
Occupation								
Employer								
First Name		Middle Name		Description of In-Kind Contribution Staff Time, Supplies and Literature		Value of In-Kind Contribution 4635.95		
Last Name/Organization Name Stand Up Nashville INC								
Address 810 Dominican Dr								
City Nashville		State TN					Zip Code 37221	
Occupation								
Employer								
First Name		Middle Name		Description of In-Kind Contribution Transit Organizing		Value of In-Kind Contribution 2250.00		
Last Name/Organization Name The Equity Alliance Fund								
Address PO Box 331821								
City Nashville		State TN					Zip Code 37203	
Occupation								
Employer								
First Name		Middle Name		Description of In-Kind Contribution Phonebanking and Canvassing		Value of In-Kind Contribution 239.30		
Last Name/Organization Name Davidson County Democratic Party								
Address 1814 Hayes St,								
City Nashville		State TN					Zip Code 37203	
Occupation								
Employer								
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS					9810.25			
(Carry forward to item 3 of next page if additional pges of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 20.b. of summary.)								



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE				2. REPORT COVERING PERIOD				
				FROM:	TO:			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount			
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)								
First Name		Middle Name		Description of In-Kind Contribution Campaign Services / Paid Field Meta/Facebook		Value of In-Kind Contribution 77,312.50		
Last Name/Organization Name Nashville Moves Action Fund								
Address 1 Vantage Way Suite C140								
City Nashville		State TN					Zip Code 37228	
Occupation								
Employer								
First Name		Middle Name		Description of In-Kind Contribution		Value of In-Kind Contribution		
Last Name/Organization Name								
Address								
City		State					Zip Code	
Occupation								
Employer								
First Name		Middle Name		Description of In-Kind Contribution		Value of In-Kind Contribution		
Last Name/Organization Name								
Address								
City		State					Zip Code	
Occupation								
Employer								
First Name		Middle Name		Description of In-Kind Contribution		Value of In-Kind Contribution		
Last Name/Organization Name								
Address								
City		State					Zip Code	
Occupation								
Employer								
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3 of next page if additional pges of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 20.b. of summary.)					87,122.75			



ITEMIZED STATEMENT OF LOANS - SMC

1. NAME OF COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 owed to any person/business at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Loans Received This Period
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code	Date of Loan		
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code	Date of Loan		
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code	Date of Loan		
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code	Date of Loan		
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code	Date of Loan		
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code	Date of Loan		
4. TOTALS (Total from "Outstanding Balance - (End of Period)" column must also be shown in item 21 on summary page.)					



ITEMIZED STATEMENT OF OBLIGATIONS - SMC

1. NAME OF COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
4. TOTALS (Total from "Outstanding Balance - (End of Period)" column must also be shown in item 22.b on summary page.)						

