

### For Single-Measure Committees (SMC)

## SUMMARY PAGE - SMC

11. NAME OF COMMITTEE (In Full) Property Tax 4 Nashville Transit	12. REPORT COVERING THE PERIOD FROM: 10/1/2024 TO: 10/26/2024
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**RECEIPTS**

13. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) .....	\$ 10.00
b. Itemized Contributions (over \$100 from each source this period) .....	\$ 100.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.) .....	\$ 110.00

14. LOANS RECEIVED THIS REPORTING PERIOD .....

\$ 1,000.00

15. INTEREST RECEIVED THIS REPORTING PERIOD .....

\$ 0

16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.) .....

\$ 1,110.00

  
**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)

QR Code services .....	\$ 40.95
Bank Fees .....	\$ 1.23
.....	\$
.....	\$
.....	\$
.....	\$

Total of Expenditures (\$100 or less each payee) .....

\$ 42.18

b. Itemized Expenditures (Over \$100 each payee this period) .....

\$ 454.93

c. TOTAL EXPENDITURES (other than loan repayments)(add 17.a. and 17.b.) .....

\$ 497.11

18. LOAN REPAYMENTS MADE THIS PERIOD .....

\$ 0

19. TOTAL DISBURSEMENTS (add 17.c. and 18.) (must be shown in item 10.c.) .....

\$ 497.11

  
**20.IN-KIND CONTRIBUTIONS**

a. Unitemized in-kind contributions (\$100 or less from each source this period) .....

\$ 28.65

b. Itemized in-kind contributions (over \$100 from each source this period) .....

\$ 0

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.) .....

\$ 28.65

  
**21.LOANS**

LOANS OUTSTANDING (must be shown in item 10.e.) .....

\$ 1,000.00

  
**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.) .....

\$ 0





# ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE <b>Property Tax 4 Nashville Transit</b>			2. REPORT COVERING THE PERIOD FROM: <b>10/1/2024</b> TO: <b>10/26/2024</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$0</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)				
First Name <b>William</b>	M.I. <b>W,</b>	Last Name/Organization Name <b>Howell</b>	Amount of Contribution <b>\$100.00</b>	
Address <b>1701 Sweetbriar Ave.</b>				
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37212</b>		
Occupation <b>Retired</b>				
Employer <b>Retired</b>				
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.)				<b>\$100.00</b>



# ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE Property Tax 4 Nashville Transit			2. REPORT COVERING THE PERIOD FROM 10/1/2024 TO: 10/26/2024		
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$0</b>	
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 <b>Clover Credit Card Reader</b>	Amount of Expenditure <b>\$153.12</b>
Last Name/Business Name <b>Adnet Payment Technologies</b>					
Address <b>Amazon Marketplace</b>					
City	State	Zip Code			
First Name		Middle Name		Purpose of Expenditure <b>Print door hangers</b>	Amount of Expenditure <b>\$196.93</b>
Last Name/Business Name <b>American Press, Inc.</b>					
Address <b>3990 Dickerson Pike</b>					
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37207</b>			
First Name		Middle Name		Purpose of Expenditure <b>Website</b>	Amount of Expenditure <b>\$104.88</b>
Last Name/Business Name <b>Wordpress</b>					
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name		Middle Name			
Last Name/Business Name					
Address					
City	State	Zip Code			
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.)					<b>\$454.93</b>



# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE Property Tax 4 Nashville Transit				2. REPORT COVERING PERIOD FROM: 10/1/2024 TO: 10/26/2024				
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>\$0</b>			
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 <b>William</b>		Middle Name <b>W.</b>		Description of In-Kind Contribution <b>photocopies of 2018 transit referendum disclosures - 191 pages</b>		Value of In-Kind Contribution <b>\$28.65</b>		
Last Name/Organization Name <b>Howell</b>								
Address <b>1701 Sweetbriar Ave.</b>								
City <b>Nashville</b>		State <b>TN</b>					Zip Code <b>37212</b>	
Occupation <b>retired</b>								
Employer <b>retired</b>								
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.)					<b>\$28.65</b>			



## ITEMIZED STATEMENT OF LOANS - SMC

<b>1. NAME OF COMMITTEE</b> <b>Property Tax 4 Nashville Transit</b>				<b>2. REPORT COVERING THE PERIOD</b> FROM <b>10/1/2024</b> TO <b>10/26/2024</b>			
<b>3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN</b> (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	Loan Payments This Period	Outstanding Balance (End of Period)
First Name <b>William</b>		Middle Name <b>W.</b>		-0-	\$1,000.00	0	\$1,000.00
Last Name/Business Name <b>Howell</b>							
Address <b>1701 Sweetbriar Ave.</b>							
City <b>Nashville</b>		State <b>TN</b>	Zip Code <b>37212</b>	Date of Loan <b>October 1, 2024</b>			
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			
<b>4. TOTALS</b> (Total from "Outstanding Balance - (End of Period)" column must also be shown in item 21 on summary page.)							\$1,000.00

## ITEMIZED STATEMENT OF OBLIGATIONS - SMC

<b>1. NAME OF COMMITTEE</b> <b>Property Tax 4 Nashville Transit</b>				<b>2. REPORT COVERING THE PERIOD</b> <b>FROM 10/1/2024 TO: 10/26/2024</b>			
<b>3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION</b> (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				<b>Outstanding Balance</b> (Beginning of Period)	<b>Debt Incurred</b> This Period	<b>Payments</b> This Period	<b>Outstanding Balance</b> (End of Period)
First Name		Middle Name		0			0
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							
<b>4. TOTALS</b> (Total from "Outstanding Balance - (End of Period)" column must also be shown in item 22.b on summary page.)							0

