CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For Single-Measure Committees (SMC)

DATE OF REPORT 2. NAME OF COMMITTEE					
1. DATE OF REPORT 2. NAME OF COMMITTEE Vota No On					
2. SHORTNAME OF COMMITTEE (IFAPPLICABLE)					
ADDRESS AND PHONE Street or Rural Route City State Zip Cod.	e Phone				
	7279				
PO BOX 293068 Nashville TN 3.					
Opposition to Constitutional Amendment					
5.A. NAME OF POLITICAL TREASURER	5.B. DATEAPPOINTED				
A) Wilkins	5/20/22				
8. CATEGORY OR REPORT (Check one)	YEAR YEAR-END				
QUARTER QUARTER QUARTER PRIMARY GENERAL SUPP	LEMENTAL SUPPLEMENTAL				
7.A.BEGINNING DATE OF REPORTING PERIOD 7.B. ENDING DATE OF REPORTING PE	RIOD				
1/16/23 6/76/23					
	wed total \$1,000 or less AND				
expenditures total \$1,000 or less for this reporting period. I do solemnly swear or affirm that the in	nformation contained in this statement				
is true and that the committee has compiled with all applicable provisions of the Campaign Finance and 10f must also be completed.)	adi Disclosure Act. (hems 100., 10e.				
B. This committee is required to file a detailed financial disclosure because contributions (including in	n-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 expendi-					
tures required to be reported by political campaign committees by the Campaign Financial Disclosure Act.					
1111121					
AL Welkins	20 Dec 23				
signature of political treasurer	date				
9. WITNESS SIGNATURE					
QUIL TO BUTTON CHOUNT	12/20/22				
skanalure of witness	L LU LO				
10. SUMMARY	nca Gu				
a. BALANCE ON HAND LAST REPORT	097.94				
b. TOTAL RECEIPTS THIS PERIOD					
c. TOTAL DISBURSEMENTS THIS PERIOD	.101.75				
d. BALANCE ON HAND (10.a. plus 10.b. minus 10.c.)	\$ 35,996.19				
e. TOTAL LOANS OUTSTANDING	X				
(. TOTAL OBLIGATIONS OUTSTANDING	s_ <u>&</u>				
	ų.				

11. NAME OF COMMITTEE (In Full)	12. REPORT COV	12. REPORT COVERING THE PERIOD	
Vote No On 1	FROM: 1/16/23	то: 6/3 0/27	
RECEIPTS 13. CONTRIBUTIONS (other than loans and interest)	11		
a. Unitemized Contributions (\$100 or less from each source this period)	· À		
b. Itemized Contributions (over \$100 from each source this period)	4		
		— · ×	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)			
14. LOANS RECEIVED THIS REPORTING PERIOD			
15. INTEREST RECEIVED THIS REPORTING PERIOD		4 *************************************	
16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.)		\$ _\&	
17. EXPENDITURES (other than loan payments)			
 a. Unitemized Expenditures (\$100 or less each payee this period) (must be listed b gasoline) 	y category - e.g., prir	iting, postage,	
Modia Disite \$ 39.99			
Midicipisate \$ 79.9			
media Duite 1 \$ 74.9	8		
Dank Fcc \$ 72.0	00		
Quich Apples \$ 79.5	 } O		
\$			
	20176		
Total of Expenditures (\$100 or less each payee)	There's	—::	
b. Itemized Expenditures (Over \$100 each payee this period)			
c. TOTAL EXPENDITURES (other than loan repayments)(add 17.a. and 17.b)			
18. LOAN REPAYMENTS MADE THIS PERIOD			
19. TOTAL DISBURSEMENTS (add 17.c. and 18.) (must be shown in item 10.c.)		\$ 2,101.75	
20.IN-KIND CONTRIBUTIONS	>		
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$	_	
b. Itemized in-kind contributions (over \$100 from each source this period)	\$&		
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.)	\$_&	
21.LOANS			
LOANS OUTSTANDING (must be shown in item 10.e.)	***************************************	.\$_&	
22.OBLIGATIONS			
a. Unitemized Obligations Outstanding (\$100 or less each)	\$_0	_	
b. Itemized Obligations Outstanding (Over \$100 each)	\$_Q	-	
c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown i item	10.f.)	.\$_Q	



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ITEMIZED STATEMENT OF EXPENDITURES - SMC

1. NAME OF COMMITTEE		11 0 1			ERING THE PERIOD	
101	C	No On 1		FROM: 1/16/23	TO: 6/30/23	
					Amount	
3. TOTAL ITEMIZED EXPENDITURES						
l .	S FOR EA	ACH ITEMIZED EXPEN	DITURE (any expenditures totaling more than \$	100 to a sigle payee d	uring the period,	
must be itemized.)						
First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		Confeerce	ji			
Committee On States		7:4.6		\$1750		
PO DOX 1607			1 (chet		- درا الإ	
	Slale	^{Zip Code} 27602	_			
City Rulzish	STATE OF THE PARTY OF		TO ASSESS THE PARTY OF THE PART			
First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	-		- 			
			1			
Address						
	Lau	T ₂ , o 1	_			
City	State	Zip Code	1			
First Name	Middle Na	ime	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address	-		_	1		
, and a second			l .			
City	State	Zip Code	1			
FirstName	Middle Na	me	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address		+				
City	State	Zip Code				
5.30	17.10		- 12 · · · · · · · · · · · · · · · · · ·		war in the state of the state o	
FirstName	Middle Na	me	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name			-			
Address						
0"	I ou i	I a c	4			
City	State	Zip Code				
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address		-				
City	State	Zip Code				
		Harris Waller	LILLING THE STATE OF THE STATE			
5. TOTAL ITEMIZED EXPENDITURES						
(Carry forward to item 3. of next page if a					x 1750	
(If this is the last page of campaign expend	atures, th	is amount must be showi	n in item 17b. of summary.)			

