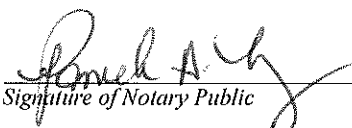
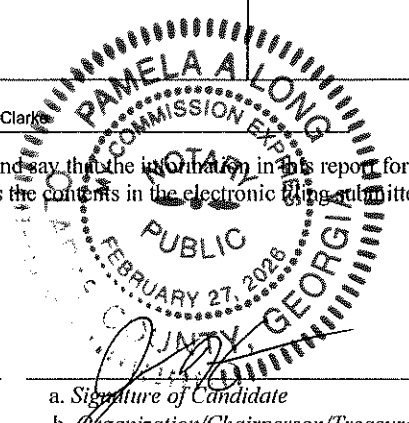


Campaign Contribution Disclosure Report Georgia Government Transparency and Campaign Finance Commission 200 Piedmont Avenue S.E. Suite 1416 West Tower Atlanta, GA 30334 404-463-1980 www.ethics.ga.gov			
1. Report Type (Select One) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment Amendment # _____	2. Filing is being made on behalf of (Select One): Candidate or Public Official Office Held or Sought <u>Athens-Clarke County Commission District 6</u> <small>(Include county, municipality, district, post or judicial seat)</small> Filer ID <u>C2019001954</u> <small>(Filer ID that begins with the letter "C")</small> Organization or Person Other than Candidate's Campaign Committee Committee Name: _____ Filer ID: _____ <small>(Filer ID that begins with the letter "NC")</small>		Use Earlier of Post Mark or Hand-Delivered Date <div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div>
JUN 18 2024 PM 3:36			
3. Identifying and Contact Information			
(1) <u>Jesse M. Houle</u> (2) <u>6/13/2024</u> <i>Full Name of Candidate or Other Than Candidate Campaign Committee Name</i> <i>Today's Date</i>			
(3) <u>PO Box 445, Athens, GA 30603</u> <i>Mailing Address</i> <i>City</i> <i>State</i> <i>Zip Code</i>			
(4) <u>706-372-2896</u> and/ or <u>jesseforathens@gmail.com</u> <i>Primary Contact Phone Number</i> <i>E-Mail</i>			
(5) If a Candidate or Public Official is there a campaign committee (one or more persons) to make campaign transactions, keep financial records of the campaign or file the reports? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(6) If yes, is the committee registered with the Commission? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(7) If yes, complete the following: <u>Kathleen Westbrook</u> <u>Michael Songster</u> <i>Name of Committee Chairperson</i> <i>Name of Committee Treasurer</i>			
4. Period for which you are Reporting			
You Must Check Only One Box			
My Non-Election Year <input checked="" type="checkbox"/> June 30, 2024 (year) <input type="checkbox"/> December 31, (year) Supplemental Reporting <input type="checkbox"/> June 30, (year) <input type="checkbox"/> December 31, (year) <small>*Supplemental reports are required of candidates who have unsuccessfully campaigned for office or have resigned from office. See O.C.G.A. § 21-5-34i</small>	My Election Year <input type="checkbox"/> January 31, (year) <input type="checkbox"/> April 30, (year) <input type="checkbox"/> June 30, (year) <input type="checkbox"/> September 30, (year) <input type="checkbox"/> October 25, (year) <input type="checkbox"/> Dec. 31, (year)	Run-Offs <small>(Report required only if you are in a Run-Off Election)</small> <input type="checkbox"/> 6 days before Primary Run-Off (year) <input type="checkbox"/> 6 days before General Run-Off (year) <input type="checkbox"/> 6 days before Special Primary Run-Off (year) <input type="checkbox"/> 6 days before Special Run-Off (year)	Special Election <input type="checkbox"/> 15 days before Special Primary, (year) <input type="checkbox"/> 15 days before Special, (year) <input type="checkbox"/> Dec. 31, (year)
State of <u>Georgia</u> County of <u>Clarke</u>			
I, <u>Jesse Houle</u> , being duly sworn (affirm), depose and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.			
Sworn to and subscribed before me on <u>June 18, 2024</u>			
 Signature of Notary Public	<u>2/26/27</u> Commission Expiration	<div style="text-align: center;">  </div> a. Signature of Candidate b. Organization/Chairperson/Treasurer	

CFC-CCDR 10/19

State of Georgia
Campaign Contribution Disclosure Report
Summary Report

CONTRIBUTIONS RECEIVED

1	<input type="checkbox"/> I have no contributions to report. <input type="checkbox"/> I have the following contributions, including Common Source, to report:	In-Kind Estimated Value	Cash Amount
2	A. If this is the first time to file a disclosure report for the current officesought, ENTER 0 in both columns (one time only); or B. If this is the first report of this Election Cycle*, ENTER 0 in the in-kind column and list any net balance on hand brought forward from the previous election cycle in the cash amount column (Line 15 of previous report, or total funds left over at year end of previous cycle); or C. If this filing is the second or subsequent filing of this Election Cycle, list totals from Line 6 of previous report in both the in-kind and cash amount columns.		\$3009.31
3	Total amount of all itemized contributions received in this reporting period which is listed on the "Itemized Contributions" page.		
3a	All loans received this reporting period.		
3b	Interest earned on campaign account this reporting period.		
3c	Total amount of investments sold this reporting period.		
3d	Total amount of cash dividends and interest paid out this reporting period.		
4	Total amount of all separate contributions of \$100 or less received in this reporting period and not listed on the "Itemized Contributions" page. "Common Source" contributions must be aggregated on the "Itemized Contributions" page.		
5	Total contributions reported this period. (Line 3 + 3a + 3b + 3c + 3d + 4)		
6	Total contributions to date. Total to be carried forward to next report of this election cycle*. (Line 2 + 5)		

EXPENDITURES MADE

7	<input type="checkbox"/> I have no expenditures to report. <input checked="" type="checkbox"/> I have the following expenditures to report:		
8	Total expenditures made and reported prior to this reporting period. If this is the A. First report of this Election Cycle*, ENTER 0. B. Second or subsequent filing ENTER Line 12 of previous report.		Ø
9	Total amount of all itemized expenditures made in this reporting period which are listed on the "Itemized Expenditures" page.		\$1096.08
10	Total amount of all separate expenditures of \$100.00 or less that were made in this reporting period and not listed on the "Itemized Expenditures" page		
11	Total expenditures reported this period. (Line 9 + 10)		\$1096.08
12	Total expenditures to date. Total to be carried forward to next report of this election cycle*. (Line 8 + 11)		\$1096.08

INVESTMENTS

13	Total value of investments held at the beginning of this reporting period.		
14	Total value of investments held at the end of this reporting period.		

TOTAL NET BALANCE ON HAND

15	Net balance on hand. (Line 6 - 12 + 14)		\$47.08
----	--	--	---------

* O.C.G.A. 21-5-3(10): Election cycle means the period from the day following the date of an election or appointment of a person to elective public office through and of the next such election of a person to the same public office and shall be construed and applied separately for each elective office including the date.

CFC-CCDR 10/19

State of Georgia
Campaign Contribution Disclosure Report
Outstanding Indebtness

Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	
Election Cycle*: _____ Election Year: _____		<u>Amount</u>
1	Outstanding indebtedness at the beginning of this reporting period.	
2	Loans received this reporting period.	
3	Deferred payment of expenses this reporting period	
4	Payments made on loans this reporting period.	
5	Credits received on loans this reporting period	
6	Payments this reporting period on previously deferred expenses.	
7	Total indebtedness at the close of this reporting period. (Line 1 + 2 + 3 - 4 - 5 - 6)	

* Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)
 Public Officer/Candidate/Other Than Candidate Committee Name

None

CFC-CCDR 10/19

None

State of Georgia

Campaign Contribution Disclosure Report Itemized Contributions

Must list contributions received by a single contributor for which the aggregate total more than \$100.00.

Note: Loans are no longer reported in "Itemized Contributions" section. See Loan Reporting section below.

Full Name of Contributor Mailing Address (Affiliation of Committee if any)		Contributor		Election Cycle**	Cash Amount	In-Kind Contributions	
		Received Date Contribution Type*	Occupation & Employer			Estimated Value	
						Description	
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Primary	Cash Amt.	Est. Value	
Last Name						Description	
Address							
Address2							
City		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	<input type="checkbox"/> Run-Off Special <input type="checkbox"/> Primary	Cash Amt.	Description	
State							<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan
Zip							
Aff. Comm.							
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Primary	Cash Amt.	Est. Value	
Last Name						Description	
Address							
Address2							
City		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	<input type="checkbox"/> Run-Off Special <input type="checkbox"/> Primary	Cash Amt.	Description	
State							<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan
Zip							
Aff. Comm.							
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Primary	Cash Amt.	Est. Value	
Last Name						Description	
Address							
Address2							
City		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer	<input type="checkbox"/> Run-Off Special <input type="checkbox"/> Primary	Cash Amt.	Description	
State							<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan
Zip							
Aff. Comm.							

Itemized Contributions Page Total \$ _____ \$ _____

CFC-CCDR 10/19

None

First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address						
Address2						
City						
State	Zip					
Aff. Comm.						
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address						
Address2						
City						
State	Zip					
Aff. Comm.						
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address						
Address2						
City						
State	Zip					
Aff. Comm.						
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address						
Address2						
City						
State	Zip					
Aff. Comm.						
First Name or Business Name		Date	Occupation	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> Special Primary <input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special <input type="checkbox"/> Run-Off Special Primary	Cash Amt.	Est. Value
Last Name		<input type="checkbox"/> Monetary <input type="checkbox"/> In-Kind <input type="checkbox"/> Common Source <input type="checkbox"/> Credit Received on Loan	Employer			Description
Address						
Address2						
City						
State	Zip					
Aff. Comm.						

Itemized Contributions Page Total \$ _____ \$ _____

* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

** Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)

*** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

CFC-CCDR 10/19

Loan Reporting			
Name of Lender & Mailing Address	1. Date of Loan 2. Amount of Loan 3. Election Cycle**	Person(s) responsible for repayment of loan & Mailing Address	1. Occupation & 2. Place of Employment 3. Fiduciary Relationship***
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General	Address	3. <input type="checkbox"/> Public Officer
Address2	<input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Address2	<input type="checkbox"/> Candidate
City	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special	City	<input type="checkbox"/> Other Than Candidate Committee Name
State	<input type="checkbox"/> Run-Off Special Primary	State	
Zip		Zip	
Lender Name (First Name, Business, Inst.)	1.	First Name	1.
Lender Last Name	2.	Last Name	2.
Address	3. <input type="checkbox"/> Primary <input type="checkbox"/> General	Address	3. <input type="checkbox"/> Public Officer
Address2	<input type="checkbox"/> Special <input type="checkbox"/> Special Primary	Address2	<input type="checkbox"/> Candidate
City	<input type="checkbox"/> Run-Off Primary <input type="checkbox"/> Run-Off General <input type="checkbox"/> Run-Off Special	City	<input type="checkbox"/> Other Than Candidate Committee Name
State	<input type="checkbox"/> Run-Off Special Primary	State	
Zip		Zip	
Reference: OCGA § 21-5-34(b)(1)		Loan Page Total \$ _____	

* Contribution Type (Monetary, In-Kind, Common Source, Credit Received on Loan)

** Election Cycle (Primary, General, Special, Special Primary, Run-Off Primary, Run-Off General, Run-Off Special, Run-Off Special Primary)

*** If any such person(s) shall have a fiduciary relationship to the lending institution or party making the advance or extension of credit

None.

CFC-CCDR 10/19

State of Georgia Campaign Contribution Disclosure Report Itemized Expenditures

Must list expenditures made to a single recipient for which the aggregate total more than \$100.00.

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name U.S. Post Office Last Name	Date April 5, 2024	Occupation Employer	Po Box Renewal (Po Box 445 Athens, GA 30603)	\$182-
Address 115 E. Hancock Ave Address2 City Athens State GA Zip 30601	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
First Name Office Depot Last Name	Date April 8, 2024	Occupation Employer	Office Supplies (Printer Ink, Printer Paper, Highlighters, Sticky Notes)	\$178.17
Address 3045 Atlanta Hwy Address2 City Athens State GA Zip 30606	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
First Name Malcolm for Commissioner Last Name	Date April 9, 2024	Occupation Employer	Donation to Campaign (Rashe Malcolm, Candidate, District 6, Acc Commission)	\$200-
Address Address2 City Athens State GA Zip	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			

Page Total \$ 560.17

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)
 Public Officer/Candidate/Other Than Candidate Committee Name

CFC-CCDR 10/19

List Name and Mailing Address of Recipient	Exp. Date Exp. Type*	Occupation & Employer	Expenditure Purpose	Amount Paid
First Name <i>The Committee to Elect John Q. Williams</i> Last Name	Date <i>April 11, 2024</i>	Occupation Employer	<i>Campaign Contribution</i> <i>(Sheriff John Q. Williams' Re-Election Campaign)</i>	<i>\$150-</i>
Address Address2 City <i>Athens</i> State <i>GA</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Zip				
First Name <i>Melissa</i> Last Name <i>Link</i>	Date <i>April 16, 2024</i>	Occupation Employer	<i>Campaign Contribution</i> <i>(Acc District 2 Commissioner Link's Re-Election Campaign)</i>	<i>\$100-</i>
Address <i>148 Hiawasse Ave</i> Address2 City <i>Athens</i> State <i>GA</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Zip <i>30601</i>				
First Name <i>Carol Myers' Committee to Re-Elect</i> Last Name	Date <i>April 16, 2024</i>	Occupation Employer	<i>Campaign Contribution</i> <i>(Acc District 8 Commissioner Myers' Re-Election Campaign)</i>	<i>\$150-</i>
Address Address2 City <i>Athens</i> State <i>GA</i>	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Zip				
First Name <i>Zoom</i> Last Name	Date <i>April 19, 2024</i>	Occupation Employer	<i>Renewal of Video Conferencing Services Subscription</i>	<i>\$135.91</i>
Address Address2 City State	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Refund <input type="checkbox"/> Reimbursement <input type="checkbox"/> Credit Card <input type="checkbox"/> 3rd Party <input type="checkbox"/> Deferred Payment <input type="checkbox"/> Payment on Deferred Expense <input type="checkbox"/> Investment			
Zip				

* Expenditure Type (Expenditure, In-Kind, Loan Repayment, Refund, Reimbursement, Credit Card, 3rd Party, Deferred Payment on Deferred Expense, Investment)Public Officer/Candidate/Other Than Candidate Committee Name

Page Total \$ 535.91

CFC-CCDR 10/19

State of Georgia
Campaign Contribution Disclosure Report
Investments Statement

1. Investment Name	Account #
Institution/Person Holding Account _____ Mailing Address _____ Address2 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	Difference in value \$
	Interest Paid Out \$
	Cash Dividends \$

Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss

2. Investment Name	Account #
Institution/Person Holding Account _____ Mailing Address _____ Address2 _____ City _____ State _____ Zip _____	Value at beginning of reporting period \$
	Value at end of reporting period \$
	Difference in value \$
	Interest Paid Out \$
	Cash Dividends \$

Investment Transactions					
Date	Person(s) Involved in Transaction	Value of investment purchased	Value of investment sold	Profit	Loss

<u>Total value of investments at beginning of reporting period \$</u> <u>Total value of investments at end of reporting period \$</u> <u>Total difference in value \$</u>	Page Total Cash Dividends: \$ _____ Page Total Interest Paid Out: \$ _____ Page Total Profit: \$ _____ Page Total Loss: \$ _____
---	---

None

State of Georgia
Campaign Contribution Disclosure Report
Addendum Statement

The Addendum Statement should be used for explanation of any additional information needed to complete an accurate filing of this report. Information that is to be reported in the body of the report **should not** be listed on Addendum Statement.

\$3009.31 was the total amount on-hand as of my last filing, and the amount carried into 2021.

I subsequently signed the affidavit re: not exceeding \$2500.

Expenditures did not exceed \$2500 until April 2024.

Per guidance from ethics office, this report only itemizes the expenditures from this calendar year to-date.

The balance on hand at this time is \$47.08.

The other expenditures not itemized all took place between January 2021 through December 2023. Those expenditures total \$1866.15

$$\begin{array}{r}
 \$3009.31 \\
 - \$1096.08 \\
 - \$47.08 \\
 \hline
 \$1866.15
 \end{array}$$

Zero contributions have been received since 2020.