CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

RECEIVED CO.

DATE OF REPORT		illuidate Committe	ees	€ 19
	2.a. NAME OF	CANDIDATE OR COMMITTEE	JUL	2 6 2018
2.b. IF COMMITTEE, NAME OF CAN	8 / Kai	1 Justice	LMILE	(The country)
THE OF CAR	DIDATE	,	3. ELECTION DATE	N COMMISSION
4.a. CAMPAIGN ADDRESS AND PHO	DNE		2018	
Street or Rural Route	City	State	Zip Code	Phone
2744 N. M+ 2 4.b. CANDIDATE'S HOME ADDRESS Street or Rural Pouts	Juliet Rd., M	+ Juliot TN		615- 758- 245
4.b. CANDIDATE'S HOME ADDRESS Street or Rural Route	(if different than 4.a.)	1 00 11 01 7.0	01122	758-245
	City	State	Zip Code	Phone
5. OFFICE SOUGHT (include district	number, if applicable)	6. NAME OF POLITICAL T		
Sheriff of W:	1500 Co	6. NAME OF POLITICAL 1	REASURER (may be	candidate)
7. CATEGORY OR REPORT (Check o	ne)	10111	Easley	
FIRST SECOND	THIRD FOURTH			
QUARTER QUARTER C 8.a. BEGINNING DATE OF REPORTING P	MARTER CHARTER	PRE- PRIMARY GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END
7 -1 -1		8.b. ENDING DATE OF REPOR	RTINGPERIOD	SUPPLEMENTAL
9. (Check one)	8	7-23-	1.8	
·				
 This campaign is exempt fro tures total \$1,000 or less for 	m detailed disclosure because	e contributions (including in-kind lete items 12d., 12e. and 12f.)	l) received total \$1,000	or less AND expendi-
 This campaign is required to and/or expenditures total mo 	file a detailed financial disclore re than \$1,000 for this report	sure because contributions (incl	uding in-kind) received	total more than \$1 000
	To than \$1,000 for this report	ng period.		π
10. I/we do solemnly swear or affirm th	nat the information contained	in this access to		
 I/we do solemnly swear or affirm the accurate accounting of campaign or Financial Disclosure Act. Additional 	ontributions and expenditures	required to be reported by the	Sure report is true and	that this report is an
Financial Disclosure Act. Additional benefit of the candidate or for any o	ily, i/we swear or affirm that r ther nonpolitical purpose as i	no campaign contributions have	been expended for the	personal financial
	/ /	owned by the lederal internal re	venue code.	
agrature of candidate	2/26/18	W 119/		1/20/18
agriature of candidate	/ date	signature of p	olitical treasurer	date
11. WITNESS SIGNATURE				
1		1		
Sterm houce	7/26/18	Janua (1	72510
signature of witness	date	Survin	of witness	7-25-18
		- Jognature	or witness	date
2. SUMMARY				
a. BALANCE ON HAND LAST REPO	RT	¢	3231.94	
		· -		
b. TOTAL RECEIPTS THIS PERIOD		\$	5450.00	
c. TOTAL DISBURSEMENTS THIS PE	RIOD		3450.00 4866669	
			···	
d. BALANCE ON HAND (12.a. plus 1	2.b. minus 12.c.)		\$ <u>l '</u>	8 15.25
e. TOTAL LOANS OUTSTANDING				
e. TOTAL LOANS OUTSTANDING			\$ <u></u>	6
f. TOTAL OBLIGATIONS OUTSTANDI	NG			<u> </u>
			\$ 	2



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COV	ERING THE PERIOD
RECEIPTS PUSTICE	FROM: July 1	10: July 23
15. CONTRIBUTIONS (other than loans and interest)	·	•
a. Unitemized Contributions (\$100 or less from each source this period)	\$ O	
b. Itemized Contributions (over \$100 from each source this period)	\$ 3450.00	-
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		= \$345000
16. LOANS RECEIVED THIS REPORTING PERIOD		•
17. INTEREST RECEIVED THIS REPORTING PERIOD		•
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		* 3450.00
DISBURSEMENTS		
19. EXPENDITURES (other than loan payments)		
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g	t printing	
Auto Fuel \$ 55.73		Jasoline)
Office Supplies \$ 45.00		
Food for Staff-PrzzaHut \$ 59.99	<u></u>	
Day 1.		
Supplies - Misc \$ 88.93	<u>'-</u>	
misc Food for Strift 1-7 M	<u> </u>	
\$ 61.04		
\$	<u></u>	
\$		
\$	_	
Total of Expenditures (\$100 or less each payee)\$	374.19	
b. Itemized Expenditures (Over \$100 each payee this period)\$		
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		40/1/19
20. LOAN REPAYMENTS MADE THIS PERIOD	φ	1 840.61
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	Ф	4061-19
22.IN-KIND CONTRIBUTIONS	ъ	<u> </u>
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 22.a. and 22.b.)	_	<u>a</u>
23. OBLIGATIONS		
a. Unitemized Obligations Outstanding (\$100 or less each)\$		
b. Itemized Obligations Outstanding (Over \$100 each)\$_		
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.		
12.f. (aud 25.a. and 25.b.) (must be shown i item 12.f.	.) \$ _	0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized assay)	T COVERING THE PERIOD
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 contributions)	ontributor)
Middle Name Contribution Received For:	Amount of Contribution
Last Name/Organization Name KDS Investments Gen. Prts. Address P. O. Box 1955 Runoff (Local Elections Only)	}
City Mt. Juliet State Zip Code 37121 Date of Contribution	Aggregate This Election
7-2-18	
Scott or Cheri Middle Name Contribution Received For:	Amount of Contribution
Address Address Runoff (Local Elections Only)	1
City Stale Stale Zip Code Date of Contribution	Aggregate This Election
Occupation 7-3-18 Employer	
First Name	
Contribution Received For:	Amount of Contribution
Last Name/Organization Name Primary Election Address General Election	1000.00
489 Madisan Ct. Runoff (Local Elections Only)	1000.00
Fort Myers Beach FL 33938 Date of Contribution	Aggregate This Election
Fort Myers Beach FL 33938 Date of Contribution 7-4-18	Aggregate This Election
Earl Myers Beach FL 33938 Date of Contribution 7-4-18	Aggregate This Election
Earl Myers Beach FL 33938 Date of Contribution 7-4-18	Aggregate This Election Amount of Contribution
Fort Myers Beach FL 33938 Date of Contribution 7-4-18 Inst Name Inst Name	
Fort Myers Beach FL 33938 Date of Contribution 7-4-18 Inst Name Contribution Received For: Hopper Iddress Date of Contribution 7-4-18 Contribution Received For: Primary Election	
Fort Myers Beach FL 33938 Date of Contribution 7-4-18 Inst Name Contribution Received For: Set Name/Organization Name Hopper Iddress 210 Lakeview Dr Runoff (Local Elections Only)	Amount of Contribution
Tort Myers Beach FL 33938 Date of Contribution 7-4-18 Inst Name The primary Election General Election The primary Election General El	Amount of Contribution
Date of Contribution Tour tis sat Name/Organization Name Hopper This per state of Contribution Tour tis sat Name/Organization Name Hopper This per state of Contribution Tour tis sat Name/Organization Name Tour tis sat State of Contribution	Amount of Contribution
Tort Myers Beach FL 33938 Date of Contribution 7-4-18 Inst Name Tour tis Sist Name/Organization Name Hopper Iddress 210 Lakeview Dr Runoff (Local Elections Only) State Tour tis Date of Contribution Tour tis State Tip Code Tour tis Date of Contribution Tour tis State Tip Code Tour tis Date of Contribution Tour tis Tou	Amount of Contribution
Date of Contribution Tour tis sat Name/Organization Name Hopper This per state of Contribution Tour tis sat Name/Organization Name Hopper This per state of Contribution Tour tis sat Name/Organization Name Tour tis sat State of Contribution	Amount of Contribution

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE TUSTO		2. RE FROI	PORT COVERING THE PERIOD M: 7-1-(8 TO: 7-23-18
			Amount
TOTAL ITEMIZED CAMPAIGN CONTRIBU COMPLETE THE APPROPRIATE ITEMS FOR E			2650.00
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Doug Address Address	d Const LL	Gener	300-00
CivLebanan	Sian Zip Code 37088	Date of Contribution	Aggregate This Election
Occupation		•	į
Employer		-	
First Name	Middle Name	Contribution Received For:	Amount of Contribution
	middle Harris		
Last Name/Organization Name WNRI- Noleny	ille	Primary Election Gener	al Election 250.00
Address P.O. Bot 198		Runoff (Local Elections Only)	25000
City Mt-Juliet	State Zip Code 37121	Date of Contribution	Aggregate This Election
Occupation			
Employer		-	
Firstless	I PLAN IN		
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		Contribution Received For:	
Last Name/Organization Name WNRI Holdin	gs LLC		al Markan
Last Name/Organization Name WNRI Holdin Address P.o. Bot 19 City	State Zip Code	Primary Election General	al Markan
Last Name/Organization Name WNRI Holdin Address P.O. Bot 19	gs LLC 55	☐ Primary Election ☐ General ☐ Runoff (Local Elections Only)	2 50.00
Last Name/Organization Name WNRI Holdin Address P.O. Bot 19 City Mt. Juliet Occupation	State Zip Code	☐ Primary Election ☐ General ☐ Runoff (Local Elections Only)	2 50.00
Last Name/Organization Name WNRI Holdin Address P.O. Bot 19 City Mt-Juliet Occupation Employer	95 LLC 555 State Zip Code 70 37121	Primary Election General Runoff (Local Elections Only) Date of Contribution	Aggregate This Election
Last Name/Organization Name WNRI Holdin Address P.O. Bot 19 City Mt-Juliet Occupation Employer	State Zip Code	Primary Election General Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election Amount of Contribution
Last Name/Organization Name WNRI Holdin Address P.O. Bot 19 City Mt-Juliet Occupation Employer	95 LLC 555 State Zip Code 70 37121	Primary Election General Runoff (Local Elections Only) Date of Contribution	Aggregate This Election Amount of Contribution
Last Name/Organization Name WNRI Holdin Address P.O. Bot 19 City Mt-Juliet Occupation Employer	95 LLC 555 State Zip Code 70 37121	Primary Election General Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election Amount of Contribution
Last Name/Organization Name WNRI Holdin Address P.o. Bot 19 City Mt. Juliet Occupation Employer First Name Last Name/Organization Name	95 LLC 555 State Zip Code 70 37121	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election Amount of Contribution
Last Name/Organization Name WNRI Holdin Address P.o. Bot 19 City Mt. Juliet Occupation Employer First Name Last Name/Organization Name Address	State Zip Code 37121	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution
Last Name/Organization Name WNRI Holdin Address P.o. Bot 19 City Tuliet Occupation Employer First Name Last Name/Organization Name Address City	State Zip Code 37121	Primary Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1 NAME OF CANDIDATE OR COMMITTE			2. REPORT COVE	RING THE PERIOD
Day Justic	<u>e</u>		FROM:7-1-18	TO: 7-23-18
3. TOTAL ITEMIZED CAMPAIGN EXPEND	OITURES FROM PRECEDING PA	AGE (ontor \$0 if first its mineral and		Amount
4. COMPLETE THE APPROPRIATE ITEMS FO	OR EACH ITEMIZED EXPENDITURE	(expenditures totaling more than \$100	ge)	
First Name	Middle Name	Purpose of Expenditure	to any payee during the po	and the second s
Last Name/Business Name				Amount of Expenditure
	tions Inc	Signs		
Addreas		Advertisi		576.00
CIN . CO BOY 23		Haver 1121	~ 5	
Glendale	State PA 19038			
First Name	Middle Name	Purpose of Expenditure		
Land		i whose of Exheligititie		Amount of Expenditure
Mt. Juliet Ch	ronicle	Dellana	Y	
Address	TONICIE	New paper	C	600.00
City		Ad.	İ	<i>Q00</i> • •
mt- Juliet	State Zip Code			
First Name		and the second s	NOTE OF THE PROPERTY OF THE PR	
FISTNATIE	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	1			
Lebanon tub	ilishing	1 Ad		318.75
				218.10
City	State Zip Code	-		
First Name	Middle Name	Purpose of Expenditure	,	Amount of Expenditure
Last Name/Business Name	1 .	-	i	, <u>.</u>
Allen Prin-	ting	MailingFl Adv.	yers	
Audiess	,			1781.87
City	State Zip Code	Adv.	ļ	. 8 1. 6 1
			ļ	
irst Name	Middle Name	Purpose of Expenditure	_	mount of Expenditure
ast Name/Business Name			[mount or Expenditure
Reviscal W	1/ct.	man Lati		
ddress 424 Church	SI	Marketi	7	500.00
ity	State Zip Code			
Nashville	TN 37219			
irst Name	Middle Name	Purpose of Expenditure	Δε	nount of Expenditure
st Name/Business Name				nount of Expenditure
Patton		Food for		
dress		Food for Staff		150.00
y ₁ 1	State Zip Code	Statt		
Mt-Juliet	TO			
TOTAL ITEMIZED EXPENDITURES				
(Carry forward to item 3, of next page if additional pages of	f this form are used.)			391/10
(If this is the last page of expenditures, this amount must be	pe shown in item 19b. of summary.)			392662

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMM				2. REPORT COVERING THE PERIOD
Bay Jus	tice			FROM: 7-1-18 TO: 7-23-18
3. TOTAL ITEMIZED CAMPAIGN EXP	ENDITURES	FROM PRECEDING	G PAGE (enter \$0 if first itemized page	Amount
4. COMPLETE THE APPROPRIATE ITEM	S FOR EACH I	TEMIZED EXPENDIT	URE (expenditures totaling more than \$100 t	e) 3926.6
First Name Jennifer		le Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Rusiness Name				j ·
Address Springer	•		Reinbu	
			C. Siar	200.00
City	State	Zip Code	for Sigr	plies
First Name	Middle	e Name	Purpose of Expenditure	
Last Name/Business Name			_	Amount of Expenditure
	Jire	229	Tell Ph	rone
Address		(000		
CHY	State	Zip Code	- Service	2
Dallas	74			
First Name	Middle	Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			-	
Address Address	teca.	~	Dinner	tor
City N. Mt-	N. mt- Julie Rd.			115.99
mt-Juliet	State	Zip Code 3712	Staff	
rirst Name	Nissal- N	andre experience experience experience		
ast Name/Business Name			Purpose of Expenditure	Amount of Expenditure
and Marie and Marie				
ddress				
ily	State	Zip Code		
irst Name	Middle Na	eme	Purpose of Expenditure	Amount of Expenditure
st Name/Business Name	I	······································		
ddress		······································	_	
ty				
	State	Zip Code		
rst Name	Middle Na	ne	Purpose of Expenditure	Amarakat F
st Name/Business Name		····		Amount of Expenditure

dress		- 		
/	State	Zip Code		
TOTAL ITEMIZED EXPENDITURES				
(Carry forward to item 3, of next page if additional page	ages of this form a	ere used.)		11110000
(it this is the last page of expenditures, this amount i	must be shown in	item 19b. of summary.)		4492.50
SS-1129 (Rev. 4/02)			Page (2 , 9

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDI	IDATE OR COMMITTE	E						2. REPO	ORT COVE	RING THE PERI
								FROM:		TO:
3. COMPLETE THE	APPROPRIATE ITEMS	S FOR EAC	HITEMIZ	ED LOAN	(loans totaling	more tha	an \$100 from ar	y source during t	the period)	<u> </u>
	for the Source of the Loa								en e nicht henne erstelle er	egitatika kanan materia penjanda kanan mengelah da sama.
First Name	Middle Name			Outstandin (Beginnin	g Loan Balance g of Period)		Loans eceived	Loan Payments	Ou	tstanding Loan Balanc (End of Period)
Last Name/Organization Na	me							- Lymonto		(Cita of Lettod)
Address		·		Loan Rece	ived For:			5.4	<u>,,,,,</u>	
City	To.				Primary Election General Election Date of Loan					
	State	Zip Code	Runoff (Local Elections Only)							
	List All Endo	orsers or Gu	arantors fo	r Above Lo	an (If more spa	ce is ne	eded please	attach a page)		
First Name		Middle Na			First Name					Name
ast Name/Organization Nam	ne	l <u>.</u>			Last Name/Org	anizatio	n Name			····
Address					Address					
City		State	7:- 6-4							
		State	Zip Cod	e	City				State	Zip Code
mount Guaranteed Outstandi	ing				Amount Guarant	eed Out	standing		<u>-</u>	
irst Name		Middle Nan	ne		First Name Middle Name					Name
ast Name/Organization Name					Last Name/Organization Name					
ddress				· · · · · · · · · · · · · · · · · · ·	Address					
ity		State	Zip Code		City				State	Zip Code
nount Guaranteed Outstandin	9		1		Amount Guarante	ed Outst	landing			
rst Name		Middle Name	e		First Name				1	
t Name/Organization Name					Last Name/Organization Name					
					Last Name/Organi	zation N	lame			
dress				,	Address					
Y		State	Zip Code	(City				State	Zip Code
unt Guaranteed Outstanding	l		<u> </u>	A	mount Guarantee	d Outsta	inding		<u> </u>	
l Name					Marian Marian Marian	100000				
		Middle Name		F	First Name Middle Name					
Name/Organization Name				La	ast Name/Organiz	ation Na	ime		<u> </u>	
ess				A	ddress				T.W	
		State	Zip Code	Ci	ity				State	Zip Code
int Guaranteed Outstanding				An	Amount Guaranteed Outstanding				1 5555	
tale for all I came (ac-	niste on last		este en			is make in a		7	Supering was the same	
tals for all Loans (com al loans received should also al loan payments should also	be shown in item 16, on sun	nmary page.)	•		rtstanding Loan B (Beginning of Per		Loans Received	Loar Payme		utstanding Loan Balan (End of Period)
outstanding loan balance sh	nould also be shown in item 12	2.e. on front pa	ige.)							

Page 7_ of 9 RDA 1159

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR C	2. REPORT COVERING THE PERIOD					
			-	FROM: TO:		
OBLIGATION (obligations total	COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED DBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Debt Incurred This Period	Payments This Period	Outstanding Balar (End of Period)
First Name	Middle	Name				
Last Name/Business Name						
Address			_			
City						
City	State	Zip Code			l	
Description of Obligation	<u></u>				· · · · · · · · · · · · · · · · · · ·	
First Name	Middle N	lame		All the second of the second o		
Last Name/Business Name			_			
Address				1		
Auditess						
City	State	Zip Code		}		
Description of Obligation						
First Name	ALCH- AL		and the second s			
	Infoute (value					
Last Name/Business Name						
Address			-			
City	State	Zip Code	1			
Description of Obligation		<u> </u>				
First Name						
	Middle Nai	me				
ast Name/Business Name			1			
ddress						
City	State	Zip Code				
escription of Obligation						
		Marketing to a sufficient of the processors.				
Irst Name	Middle Nam	ie		The second of the Police of the second		Maria de Carlos de C
st Name/Business Name						
dress						
ty	State	Zip Code				
escription of Obligation						
		Waster and the same of the sam				
TOTALS Total from Outstanding Balance - (End of	f Period) column must	also be shown				
in item 23b, on summary page.)	r r enour column must a	DO DE SUÓMU			-	

Itemized statement of in-kind contributions - candidate

- PAME OF CANDIDATE	-Strce	<u> </u>		FROM:	ORT COVERING THE PERIOD 7-1-18 TO: 7-23-11
3, TOTAL ITEMIZED IN-K	IND CONTRIBI	JTIONS FR	OM PRECEDING	PAGE (enter \$0 if first itemized page)	Amount
4. COMPLETE THE APPROP	PRIATE ITEMS F	OR EACH ITE	MIZED IN-KIND CO	ONTRIBUTION (in-kind contributions totaling more than \$1	70.5
First Name			Name		
Last Name/Organization Name				In-Kind Contribution Received For: Primary Election General	Value of In-Kind Contributi
				Runoff (Local Elections Only)	
Address				Date of In-Kind Contribution	Aggregate this Election
City		State	Zio Code	Proprietion of the Mind Co. 1995	Addisaste this Election
Occupation	Emplo	ver		Description of In-Kind Contribution	
		, •-			
First Name		Middle I			
.ast Name/Organization Name		IMMODIE	vaine	In-Kind Contribution Received For: Primary Election General E	Value of In-Kind Contributio
					HECHO!1
Address				Runoff (Local Elections Only) Date of In-Kind Contribution	
City		Is			Aggregate this Election
Occupation		State	Zip Code	Description of In-Kind Contribution	
	Employe	EL			
irst Name		and the same of th			
		Middle N	ame	In-Kind Contribution Received For:	Value of In-Kind Contribution
st Name/Organization Name				Primary Election General Ele	ection
ddress				Runoff (Local Elections Only)	
ity		-	_	Date of in-Kind Contribution	Aggregate this Election
		State	Zip Code	Description of In-Kind Contribution	
cupation	Employer		<u> </u>	 	
st Name		Middle Na	me	In-Kind Contribution Received For:	Value of In-Kind Contribution
st Name/Organization Name				Primary Election General Elec	ction
dress				Runoff (Local Elections Only)	
				Date of In-Kind Contribution	Aggregate this Election
y	···	State	Zip Code	Description of In-Kind Contribution	
cupation	Employer				
Name		Middle Nam		In-Kind Contribution Received For:	
Name/Organization Name				Primary Election General Elec	Value of In-Kind Contribution tion
				Runoff (Local Elections Only)	
ess				Date of In-Kind Contribution	Aggregate this Election
	····	State	Zip Code	Description of In-Kind Contribution	35 344 445 2551041
pation	Employer				
					-
TOTAL ITEMIZED IN-KIND	CONTRIBUTIO	NS			
(Carry forward to item 3, of next pag (If this is the last page of in-kind cont	e if additional pages	of this form are	used.)		
SS-1128 (Rev. 2/06)	, und antiqu	musi uc silu	was at helii ZZD, QI SUMI	Page _ 🥍 :_ of	