CAMPAIGN FINAN	PIAI DIRCI	SCIIDE &TATI	EMENT
	ate and Local Can ple-Candidate Con	didates	RECEIVED 4
	NAME OF CANDIDATE OR COM	MITTEE	V.50//
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE	CTION COUNTY
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City 1804 LAKE WERODW TRL	MINVLIET T	ate Zip Code	Phone (15) 714 8775
4.b. CANDIDATE'S HOME ADDRESS (if different than 4. Street or Rural Route City		ate Zip Code	Phone
5. OFFICE SOUGHT (include district number, if applical COMM 155 TO HER - DIST		DLITICAL TREASURER (May be o	andidate)
QUARTER QUARTER QU		PRE- MID-YEAR ENERAL SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD 4-1-2-2		EOFREPORTINGPERIOD 23-2 み	
b. This campaign is required to file a detailed fina and/or expenditures total more than \$1,000 for and/or expenditures	c this reporting period. In contained in this campaign fir expenditures required to be reported in that no campaign contributions as defined by the feder	nancial disclosure report is true an orted by the candidate committee butions have been expended for the	d that this report is an
11. WITNESS SIGNATURE Caval K. Bus 4 signature of witness di	125/22 Can	signature of witness	4/25/23 date
12. SUMMARY		d	
a. BALANCE ON HAND LAST REPORT		785.10	
total receipts this period		785.10	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c			\$
e. TOTAL LOANS OUTSTANDING		\$ _	2596.68
f. TOTAL OBLIGATIONS OUTSTANDING		\$ -	-





SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT COVERING THE PERIOD FROM: 41 / 19/20/18/21/23/22
FRANK BUSIA		PROW. 9// Zac MMISSION 3/22
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)		
a. Unitemized Contributions (\$100 or less from each source this peri		
b. Itemized Contributions (over \$100 from each source this period)		\$
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a		
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.)	\$ 785,10
DISBURSEMENTS		
19. EXPENDITURES (other than loan payments)		
a. Expenditures (\$100 or less each payee this period) (must be listed b	y category - e	e.g., printing, postage, gasoline)
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total of Expenditures (\$100 or less each payee)	*******************	\$
b. Itemized Expenditures (Over \$100 each payee this period)	***************************************	\$ 785,10
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. an	nd 19.b.)	***************************************
20. LOAN REPAYMENTS MADE THIS PERIOD		
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in ite	em 12.c.)	\$ 785,10
22.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 perio	od)	\$
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add	22.a. and 22.	b.)\$
23. OBLIGATIONS		
a. Unitemized Obligations Outstanding (\$100 or less each)		\$
b. Itemized Obligations Outstanding (Over \$100 each)		\$
a TOTAL ORLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must		



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APR 2 6 2022

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	_				RING THE PERIOD		
	FRA	MK BUS	10:4/23/22				
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount						
4. COMPLETE THE APPROPRIATE ITEMS FOR E					riod)		
First Name	Middle Na		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name			Acres 11/1	1			
R+ M PRIH	G	144146/1	785,10				
Address P.O.BOX 930		,		105,10			
City MA JULIET	State Zip Code 37 2						
First Name	Middle Na	me	Purpose of Expenditure	Armount of Expenditure			
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nam	e	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must					785,10		



											APR ,	2 6 2022
ITEM	IZE	D STA	TE	MEN	T OF	LOAI	NS - CA	NDI	DA'	ELEC	ILSON	COUNTY
1. NAME OF CANDIDATE OR COM							2.	REPORT (RIOD
FRAN	12	RUS	H				FR	OM:	122	TO:	1/2	3/22
3. COMPLETE THE APPROPRIATE				ED LOAN	(loans totaling n	nore than \$10	00 from any source	during the pe	eriod)		7	1
Complete the Following for the Source of												
First Name Middle Name Outstanding L (Beginning of			Loan Balance Loans Loan Outstanding Lo of Period) Received Payments (End of P						ace			
Last Name/Organization Name			1811	1.58 785,10 \$ 2596.68					28			
Address	- 8		<u> </u>	Loan Receive	ed For:			Date of Loa	in .	,		
City MT JULIET	State	Zip Code	< L.	Primary	Election	☐ Genera	al Election	H	14	1/2	-2-	1
					(Local Elections							
Lis First Name	t All Endor	sers or Guara Middle Name	100	or Above Loa	n (If more spa	ce is neede	ed please attach	a page)	Middle	Name	= = 77.1	
		I I I I I I I I I I I I I I I I I I I			Last Name/Ord	onization M						
Last Name/Organization Name					Last Name/Org	janization iva	ame					
Address					Address							
City		State	Zip Code City					State	Z	Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
First Name	ISTO DE	Middle Name	-	37	First Name				Middle Name			
Last Name/Organization Name					Last Name/Organization Name							
Address					Address							
City		State	Zip Co	de	City				State	Zi	p Code	
Amount Guaranteed Outstanding	mount Guaranteed Outstanding				Amount Guaranteed Outstanding							
First Name		Middle Name		First Name				Middle Name				
Last Name/Organization Name					Last Name/Org	anization Na	me		1			
Address					Address							
City		State	Zip Co	de	City				State	Z	Zip Code	
Amount Guaranteed Outstanding					Amount Guaran	teed Outstan	ading		ı			
First Name		Middle Name		distributes	First Name					Middle Name		
Last Name/Organization Name		ll			Last Name/Organization Name							
Address			Address									
City		State	Zip Cod	de	City				State Zip Code			
Amount Guaranteed Outstanding					Amount Guaran	teed Outstan	ding			-1-		
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.)			Outstanding Loa (Beginning of	an Balance	Loans Received	Loan			ding Loan d of Perior			
(Total loan payments should also be shown in it (Total loan payments should also be shown in it (Total outstanding loan balance should also be sh	em 20. on st	ımmary page.)	age.)		1811.		785,10	4			6,6	
1			<i>-</i> /				1 100			-	7 %	1

