CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

For Single-Candidate Committees 13 2021										
1.	DATE OF REPORT 2.a NAME	OF CANDIDATE OR COMMITTEE	9 .							
	7/2/21 Kic	K Bell FOR MAYE								
2.b	FEOMMITTEE, NAME OF CANDIDATE		ECTION DATECTION COMMISSION							
12	CAMPAIGN ADDRESS AND PHONE		2020							
ч.а	Street or Rural Route City Solution Solutio	Pal laborary 1 Tal	Phone (US)							
4.b	CANDIDATE'S HOME ADDRESS (if different than 4a.)	State Zip Co	ode Phone							
	Street or Rural Route City SAME AS ADDE	State Zip CC	nde i lione							
5.	OFFICE SOUGHT (include district number, if applicable)	6. NAME OF POLITICAL TREASL	JRER (may be candidate)							
-	CATEGORY OR REPORT (Check one)	TIGHTYN KEIT	4.							
7.	FIRST SECOND THIRD FOURT		MID YEAR YEAR-END PPLEMENTAL SUPPLEMENTAL							
8.a.	BEGINNING DATE OF REPORTING PERIOD	8.b. ENDING DATE OF REPORTING P								
	JAN 16,2020	June 30 907	-							
9. (Check one)									
 a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period. 										
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. Additionally 1										
11.	signature of witness date	2-21 Junfer Ma signature of w	vitness date							
12.	SUMMARY	V	1							
	a. BALANCE ON HAND LAST REPORT	\$	\$							
	b. TOTAL RECEIPTS THIS PERIOD	\$	<u> </u>							
	c. TOTAL DISBURSEMENTS THIS PERIOD	\$	<u>p</u> /							
	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		s							
	e. TOTAL LOANS OUTSTANDING	istro to campaign	s_Ø							
	f. TOTAL OBLIGATIONS OUTSTANDING		s							



MECEIVED

JUL 13 2021

ITEMIZED STATEMENT OF LOANS - CANDIDATE ON COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE								2. REPORT COVERING THE PERIOD FROM: TO:						
Kick Bell for Mayor									14,20	151		LE 50, 2021		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEM ZED LOAN (loans totaling more than \$100 from any source during the period)														
Complete the Following for the Source of	f the Loan													
Fire Name Middle Name				Outstanding (Beginning	Loan Balance of Period)	Loan Recei		Loan O Payments			Outstanding Loan Balance (End of Period)			
Last Name/Organization Name.					00			Ø						
STS Old Horn Springs RA				Loan Receiv	al Election	Date of Loan								
Lebanos	State	Zip Code 3708			(Local Elections	CAMPAIGN				2				
Lis	an (If more space is needed please attach a page)													
First Name		Middle Name			First Name					Middle	Name			
Last Name/Organization Name					Last Name/Organization Name									
Address					Address									
City	State Zip Code			City					State		Zip Code			
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding									
First Name Middle Name				First Name					Middle Name					
Last Name/Organization Name					Last Name/Organization Name									
Address					Address									
City State			Zip Coo	e City						State Zip Co		Zip Code		
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding								
First Name Middle Name					First Name Middle Name									
Last Name/Organization Name					Last Name/Organization Name									
Address					Address									
City		State	Zip Cod	le	City					State	Т	Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding									
First Name Middle Name					First Name Middle Name									
Last Name/Organization Name					Last Name/Organization Name									
Address					Address									
City		State	Zip Cod	e	City					State	Z	Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding									
Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16, on summary page.)									nding Loan Balance					
(Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)					11,000		Dougt		DA FOR	(End of Group				