# **CORRECTION/AMENDMENT AFFIDAVIT** FOR POLITICAL COMMITTEE

	ics Commission Filers) 2	Total pages filed:	OFFICE USE ONLY				
00086828		48	Date Received				
3 COMMITTEE NAME	New Blue USA PAC		ELECTRONICALLY FILED 07/17/2023				
4 TREASURER NAME	Roberts, Martha A.						
5 ORIGINAL			Date Hand-delivered or Date Postmarked				
REPORT TYPE	January 15		Receipt # Amount				
	X July 15 30th day before election	10th day after campaign treasurer resignatio					
	8th day before election	Other (specify)	Date Processed				
6 ORIGINAL PERIOD	Month Day Year	Month Day Year	—				
COVERED	Month Day Year 01/01/2023	Month Day Year THROUGH 06/30/2023	Date Imaged				
7 EXPLANATION OF		p on another set of bank recordds. Found the right b					
8 AFFIDAVIT							
		I swear, or affirm, under penalty of per and correct.	jury, that this corrected report is the				
		Check the box next to any and all appl	icable statements:				
		X Semiannual reports: I swear was made in good faith and with misrepresent the information com	out an intent to mislead or to				
		that the report as originally filed i	iness day after the date I learned				
		Martha A.	Roberts				
		Signature of Carr	npaign Treasurer				
AFFIX NOTARY S	TAMP / SEAL ABOVE						
		, th	is the day				
of	, 20, to certify	which, witness my hand and seal of office.					
Signature of offic	er administering oath	Printed name of officer administering oath	Title of officer administering oath				
	Signature of officer administering oath       Printed name of officer administering oath       Title of officer administering oath         Remember To Attach Any Part Of The Campaign Finance Report Form       Needed To Report And Explain Corrections						
Forms provided by Te	xas Ethics Commission	www.ethics.state.ty.us	V/3 5 1 a18ea2c				

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00086828	2 Total pages filed: 48		
3	COMMITTEE NAME		•	OFFICE USE ONLY		
	New Blue USA PA	С		Date Received		
				07/17/2023		
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CIT	Y; STATE; ZIP CODE			
	ADDRE33	12100 S. HWY 6 #9205		Date Hand-delivered or Date Postmarked		
	Change of Address					
		Sugar Land, TX 77498		Receipt # Amount		
				Date Processed		
				Date Imaged		
5	CAMPAIGN	MS / MRS / MR FIRST		MI		
	TREASURER NAME	Martha A.				
		NICKNAME LAST		SUFFIX		
		Roberts				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE		
	TREASURER	12100 S. HWY 6 #9205	· , - ,	- ,		
	STREET ADDRESS					
	(Residence or Business)	Sugar Land, TX 77498				
7	CAMPAIGN TREASURER	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE		
	MAILING	12100 S. HWY 6 #9205				
	ADDRESS					
	Change of Address	Sugar Land, TX 77498				
8	CAMPAIGN TREASURER		EXTENSION			
	PHONE	(817) 266-1500				
_	DEDODT					
9	REPORT TYPE	January 15	Oth day before election	Dissolution (Attach PAC-DR)		
		81	h day before election	10th day after campaign treasurer		
		X July 15		termination		
			unoff			
10	PERIOD	Month Day Year	Month Day	Year		
	COVERED	01/01/2023 TH	HROUGH 06/30/2023	3		
11	ELECTION	ELECTION DATE	ELECTION TYPE			
		Month Day Year	Primary Runoff	Other		
			General Special			
L						
		GO T	FO PAGE 2			
Foi	ms provided by Te	xas Ethics Commission www.et	hics.state.tx.us	Version V3.5.1.a18ea2ca		

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
New Blue USA PAC			00086828	3
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	<b>L CONTRIBUTIONS</b> DGES, LOANS, OR GUARANTEES OF LOANS)	\$	12,202.49
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	610.83
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	HE \$	800.00
16 AFFIDAVIT		l swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code.		
		Martha A	. Roberts	
		Signature of Car	npaign Treas	urer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tr	nis the	day
of	, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title of off	cer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.a18ea2ca

รเ	JBT	OTALS - GPAC	C	FORM GPAC
			0	4 of 48
		EE NAME USA PAC	18 Filer ID 00086828	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 12,202.49
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	ATION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 800.00
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	Х	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$ 9,300.65
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/23 Rpt: 5/48 2 FILER NAME Filer ID (Ethics Commission Filers) 3 New Blue USA PAC 00086828 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 05/07/2023 Andeer, Chervl \$50.00 6 Contributor address; City; State; Zip Code Laguna Beach, CA 92651 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/25/2023 \$10.00 Barnett, Miles Contributor address; City; State; Zip Code High Ridge, MT 63049 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/18/2023 Bracken, Truly \$10.00 Contributor address; City; State; Zip Code Prescott, AZ 86305 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/12/2023 \$25.00 Brooks, Craig Contributor address; City; State; Zip Code Bonney Lake, WA 98391 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/15/2023 \$3.00 Christopherson, Karen Contributor address; City; State; Zip Code GRAND RAPIDS, MI 49525 Principal occupation / Job title (See Instructions) Employer (See Instructions) Theraphist

1

	The Instru	ction Guide explains how to complete th	nis fo	rm.	1	Total pages Schedule A1: Sch: 2/23 Rpt: 6/48	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
	New Blue US	SA PAC				00086828	
4	Date	5 Full name of contributor out-of-state PAC (	(ID#:	)	7	Amount of Contribution (\$)	
	04/08/2023	EGGERS, CHERYL					\$10.00
		6 Contributor address; City; State; Zip Code					
		FULLERTON, CA 92831					
8	Principal occu	pation / Job title (See Instructions)	ę	B Employer (See Instructions	5)		
	R.N.			SNP			
	Date	Full name of contributor out-of-state PAC (	(ID#:	)		Amount of Contribution (\$)	
	06/17/2023	Ehrlich, Deborah					\$25.00
		Contributor address; City; State; Zip Code					
		Linden, NJ 07036-1757					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Consultant			Insight			
	Date	Full name of contributor out-of-state PAC (	(ID#:	)		Amount of Contribution (\$)	
	04/23/2023	Grant, Lena					\$25.00
		Contributor address; City; State; Zip Code			1		
		Mission, TX 78572					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	not employe	d					
	Date	Full name of contributor 🔲 out-of-state PAC (	(ID#:	)		Amount of Contribution (\$)	
	06/14/2023	Green, Meg					\$25.00
		Contributor address; City; State; Zip Code					
		Hallandale, FL 33008					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	not employe	d					
	Date	Full name of contributor 🛛 out-of-state PAC (	(ID#:	)		Amount of Contribution (\$)	
	06/06/2023	Henderson, Bob					\$100.00
		Contributor address; City; State; Zip Code					
		Deduced Otto 04 04000 0050					
$\vdash$	Duin i i	Redwood City, CA 94063-2252	i	Freedow (Construction)			
1		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	not employe	u					
l							
1							

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/23 Rpt: 7/48 2 FILER NAME Filer ID (Ethics Commission Filers) 3 New Blue USA PAC 00086828 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/14/2023 King, Allan \$10.00 6 Contributor address; City; State; Zip Code PRINCETON, NJ 08540-5852 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/20/2023 \$200.00 Lohnes, Levi Contributor address; City; State; Zip Code Nashville, TN 37221 Principal occupation / Job title (See Instructions) Employer (See Instructions) Sales ot Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/08/2023 \$15.00 Lorensen, Jo Anne Contributor address; City; State; Zip Code Black Mountain, NC 28711 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/08/2023 \$20.00 McKinley, Brenda Contributor address; City; State; Zip Code Mount Clare, WV 26408 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/17/2023 \$25.00 McKinley, Brenda Contributor address; City; State; Zip Code Mount Clare, WV 26408 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/23 Rpt: 8/48 2 FILER NAME Filer ID (Ethics Commission Filers) 3 New Blue USA PAC 00086828 5 Full name of contributor 4 Date out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/17/2023 Miller, Alison \$10.00 6 Contributor address; City; State; Zip Code Richmond, CA 94801 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/08/2023 Parr, Christina \$25.00 Contributor address; City; State; Zip Code RANDOLPH, ME 02368 Principal occupation / Job title (See Instructions) Employer (See Instructions) BCBSMA IT Strategy & Planning Consultant Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 04/08/2023 \$25.00 Patterson, Sara Contributor address; City; State; Zip Code Halethorpe, MD 21227 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/08/2023 \$5.00 Pezzino, Teresa Contributor address; City; State; Zip Code Port St Lucie, FL 34952 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/08/2023 \$5.00 Seckman, Ronnie Contributor address; City; State; Zip Code Mount Clare, WV 26408-6812 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/23 Rpt: 9/48 2 FILER NAME Filer ID (Ethics Commission Filers) 3 New Blue USA PAC 00086828 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 05/13/2023 Senn, Kevin \$25.00 6 Contributor address; City; State; Zip Code Louisville, KY 40272 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/05/2023 \$100.00 Stephens, Jan Contributor address; City; State; Zip Code Austin, TX 78757 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/17/2023 Stoltz, Antoinette \$20.00 Contributor address; City; State; Zip Code Sacramento, CA 95820 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/11/2023 \$25.00 Sutton, Cheryl Contributor address; City; State; Zip Code Westfield, MA 01085 Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher Agawam town of Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/28/2023 \$15.00 Taylor, John Contributor address; City; State; Zip Code Sugar Land, TX 77498 Principal occupation / Job title (See Instructions) Employer (See Instructions) Director NiteFlyerMedia

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 6/23 Rpt: 10/48	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	New Blue US	SA PAC			00086828	-
4	Date	5 Full name of contributor out-of-state PAC (ID#	<u></u> )	7	Amount of Contribution (\$)	
	02/10/2023	Taylor, John (Mr.)				\$686.40
	ł	6 Contributor address; City; State; Zip Code				
_	Driveinel eeeu	Sugar Land, TX 77498		Ĺ		
8	Executive Di	pation / Job title (See Instructions)	9 Employer (See Instructions Nite FLyer Media	5)		
			-	<del>.</del>		
	Date	Full name of contributor out-of-state PAC (ID#	·)		Amount of Contribution (\$)	4070 CE
	02/11/2023					\$278.65
		Contributor address; City; State; Zip Code				
	ļ					
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Executive Di		Nite FLyer Media	,		
	Date	Full name of contributor out-of-state PAC (ID#		Γ	Amount of Contribution (\$)	
	02/11/2023	Taylor, John (Mr.)	/			\$244.52
						·
	1					
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	02/23/2023	Taylor, John (Mr.)				\$261.82
	1	Contributor address; City; State; Zip Code		1		
	1	Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Executive Di		Nite FLyer Media	)		
_			-	<u> </u>	Associated Contribution (¢)	
	Date 02/27/2023	Full name of contributor out-of-state PAC (ID# Taylor, John (Mr.)			Amount of Contribution (\$)	\$11.68
	0212112020	Contributor address; City: State; Zip Code				Ψ11.00
	1	Contributor address, City, State, Zip Code				
	ļ					
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b></b> 5)		
	Executive Di	rector	Nite FLyer Media			

	The Instru	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 7/23 Rpt: 11/48	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	New Blue US	SA PAC			00086828	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	03/11/2023	Taylor, John (Mr.)				\$889.40
		6 Contributor address; City; State; Zip Code		"		
~	Duin singl oppi	Sugar Land, TX 77498		->		
8	Principal occu Executive Di	Ipation / Job title (See Instructions)	<ul> <li>9 Employer (See Instructions Nite FLyer Media</li> </ul>	S)		
				-		
	Date	—	C (ID#:)		Amount of Contribution (\$)	÷=00.00
	03/17/2023					\$599.03
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> م)		
	Executive Di		Nite FLyer Media	0)		
<u> </u>	Date	Full name of contributor out-of-state PAC		Т	Amount of Contribution (\$)	
	03/17/2023	Taylor, John (Mr.)	C (ID#)			\$287.22
	00/11/2020	Contributor address; City; State; Zip Code				Ψ <u>201.</u>
		Sugar Land, TX 77498				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC	C (ID#:)	Τ	Amount of Contribution (\$)	
	03/27/2023	Taylor, John (Mr.)				\$1.06
		Contributor address; City; State; Zip Code		"		
		Current and TV 77400				
	Dringing occ	Sugar Land, TX 77498 Ipation / Job title (See Instructions)	Employer (Soo Instruction	<u> </u>		
	Executive Di		Employer (See Instructions Nite FLyer Media	S)		
╞				<del>.</del>		
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	ቀ70 በበ
	03/27/2023	Taylor, John (Mr.)				\$79.00
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Executive Di		Nite FLyer Media			
-						

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/23 Rpt: 12/48	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	New Blue US	w Blue USA PAC			00086828	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	03/24/2023	Taylor, John (Mr.)				\$11.78
		6 Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/24/2023	Taylor, John (Mr.)				\$325.63
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/23/2023	Taylor, John (Mr.)				\$9.95
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/22/2023	Taylor, John (Mr.)				\$103.33
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/18/2023	Taylor, John (Mr.)				\$14.00
	Contributor address; City; State; Zip Code		1			
L		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/23 Rpt: 13/48	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	New Blue US	New Blue USA PAC			00086828	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/20/2023	Taylor, John (Mr.)				\$5.00
		6 Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/20/2023	Taylor, John (Mr.)				\$9.99
				•		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/20/2023	Taylor, John (Mr.)			•••••••••••••••••••••••••••••••••••••••	\$8.00
		Contributor address; City; State; Zip Code		ł		
		······································				
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Executive Di	rector	Nite FLyer Media			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/20/2023	Taylor, John (Mr.)				\$16.46
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	03/14/2023	Taylor, John (Mr.)				\$250.00
	Contributor address; City; State; Zip Code		1			
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 10/23 Rpt: 14/48	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
New Blue U	SA PAC		00086828	-
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
04/05/2023	Taylor, John (Mr.)			\$216.49
	6 Contributor address; City; State; Zip Code			
	Sugar Land, TX 77498			
	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Executive Di	1	Nite FLyer Media		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/21/2023	Taylor, John (Mr.)			\$16.19
	Contributor address; City; State; Zip Code			
	Sugar Land, TX 77498			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	<u>\</u>	
Executive Di		Nite FLyer Media	)	
			Amount of Contribution (\$)	
Date 04/21/2023	Full name of contributor out-of-state PAC (ID#: Taylor, John (Mr.)	)	Amount of Contribution (\$)	\$15.76
0412112020				Φ10.10
	Contributor address; City; State; Zip Code			
	Sugar Land, TX 77498			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	)	
Executive Di	rector	Nite FLyer Media		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/24/2023	Taylor, John (Mr.)			\$8.62
	Contributor address; City; State; Zip Code			
	Sugar Land, TX 77498		-	
-	ipation / Job title (See Instructions)	Employer (See Instructions)	)	
Executive Di		Nite FLyer Media		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	<b>*</b> 4 00
04/24/2023	Taylor, John (Mr.)			\$4.06
	Contributor address; City; State; Zip Code			
	Sugar Land, TX 77498			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Executive Di		Nite FLyer Media	)	

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/23 Rpt: 15/48	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	New Blue US	SA PAC			00086828	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	04/21/2023	Taylor, John (Mr.)				\$15.76
		6 Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/30/2023	Taylor, John (Mr.)				\$8.62
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$4.06
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$30.00
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498	-			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$8.79
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/23 Rpt: 16/48	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	New Blue US	SA PAC			00086828	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$127.54
		6 Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$15.00
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)			-	\$32.66
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$538.23
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$14.02
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
			•			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/23 Rpt: 17/48	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	New Blue US	SA PAC			00086828	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$32.41
		6 Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$9.44
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$43.63
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$9.24
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/25/2023	Taylor, John (Mr.)				\$44.94
		Contributor address; City; State; Zip Code				
∟		Sugar Land, TX 77498		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	)		
L	Executive Di	rector	Nite FLyer Media			
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/23 Rpt: 18/48	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
	New Blue US	SA PAC			00086828	-
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	04/25/2023	Taylor, John (Mr.)				\$70.95
		6 Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Executive Di	rector	Nite FLyer Media			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/25/2023	Taylor, John (Mr.)				\$31.82
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Executive Di	rector	Nite FLyer Media			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/25/2023	Taylor, John (Mr.)				\$10.80
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
	04/25/2023	Taylor, John (Mr.)				\$22.98
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/25/2023	Taylor, John (Mr.)				\$10.00
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Executive Di	rector	Nite FLyer Media			

The Instructio	on Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 15/23 Rpt: 19/48
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
New Blue USA P	PAC		00086828
4 Date 5	Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
04/27/2023	Taylor, John (Mr.)		\$79.45
6 (	Contributor address; City; State; Zip Code		
	Sugar Land, TX 77498		
8 Principal occupatio	on / Job title (See Instructions)	9 Employer (See Instructions)	
Executive Director	or	Nite FLyer Media	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/27/2023	Taylor, John (Mr.)		\$17.92
	Contributor address; City; State; Zip Code		
	- · ·		
:	Sugar Land, TX 77498		
Principal occupatio	on / Job title (See Instructions)	Employer (See Instructions)	;)
Executive Director	or	Nite FLyer Media	
Date I	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/27/2023	Taylor, John (Mr.)		\$1,792.00
	Contributor address; City; State; Zip Code		
	Sugar Land, TX 77498		
	on / Job title (See Instructions)	Employer (See Instructions)	
Executive Directo	or	Nite FLyer Media	
Date I	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/28/2023	Taylor, John (Mr.)		\$120.00
	Contributor address; City; State; Zip Code		
	Sugar Land, TX 77498		
	on / Job title (See Instructions)	Employer (See Instructions)	)
Executive Directo	or	Nite FLyer Media	
Date I	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
04/27/2023	Taylor, John (Mr.)		\$18.74
	Contributor address; City; State; Zip Code		
	Sugar Land, TX 77498		
	on / Job title (See Instructions)	Employer (See Instructions)	
Executive Directo	or	Nite FLyer Media	

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/23 Rpt: 20/48	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	New Blue US	SA PAC			00086828	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	04/28/2023	Taylor, John (Mr.)				\$16.99
		6 Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/28/2023	Taylor, John (Mr.)				\$17.83
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/01/2023	Taylor, John (Mr.)				\$8.64
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/30/2023	Taylor, John (Mr.)				\$174.47
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/30/2023	Taylor, John (Mr.)				\$8.64
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			

	The Instrue	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 17/23 Rpt: 21/48	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
	New Blue US	SA PAC			00086828	-
4	Date	5 Full name of contributor Out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	04/30/2023	Taylor, John (Mr.)				\$174.47
		6 Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	· :)	Γ	Amount of Contribution (\$)	
	04/30/2023	Taylor, John (Mr.)				\$6.93
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	04/29/2023	Taylor, John (Mr.)				\$57.92
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498		Ļ		
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di		Nite FLyer Media	_		
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	04/29/2023	Taylor, John (Mr.)				\$18.34
		Contributor address; City; State; Zip Code				
		Sugar Land TV 77400				
⊢	Dringinglaggy	Sugar Land, TX 77498				
	Executive Di	pation / Job title (See Instructions)	Employer (See Instructions Nite FLyer Media	5)		
				_		
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	<b># 10 00</b>
	04/29/2023	Taylor, John (Mr.)				\$40.00
		Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
⊢	Principal accu	pation / Job title (See Instructions)	Employer (See Instruction	<u> </u>		
	Executive Di		Employer (See Instructions Nite FLyer Media	5)		
⊢						

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/23 Rpt: 22/48	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	New Blue US	SA PAC			00086828	-
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	04/28/2023	Taylor, John (Mr.)				\$16.04
		6 Contributor address; City; State; Zip Code				
		Sugar Land, TX 77498				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/28/2023	Taylor, John (Mr.)				\$16.04
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/28/2023	Taylor, John (Mr.)				\$18.11
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/28/2023	Taylor, John (Mr.)				\$19.53
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/29/2023	Taylor, John (Mr.)				\$11.97
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/23 Rpt: 23/48	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	New Blue US	SA PAC			00086828	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	04/28/2023	Taylor, John (Mr.)				\$11.97
		6 Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Executive Di	rector	Nite FLyer Media			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/28/2023	Taylor, John (Mr.)				\$42.30
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	04/29/2023	Taylor, John (Mr.)				\$4.22
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/28/2023	Taylor, John (Mr.)				\$40.00
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/24/2023	Taylor, John (Mr.)				\$64.04
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77498				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/23 Rpt: 24/48	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	New Blue US	SA PAC			00086828	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/09/2023	Taylor, John (Mr.)				\$45.00
	ļ	6 Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Sugar Land, TX 77498				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/09/2023	Taylor, John (Mr.)				\$55.00
		Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Sugar Land, TX 77498				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Nite FLyer Media			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/14/2023	Taylor, John (Mr.)				\$300.00
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Sugar Land, TX 77498		Ĺ		
	Principal occu Executive Di	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			Nite FLyer Media	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/16/2023	Taylor, John (Mr.)				\$2,200.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Sugar Land, TX 77498				
<u> </u>	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Executive Di		Nite FLyer Media	5)		
╞				1	the state of the s	
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	ቀድባ በባ
	02/04/2023	Taylor, John (Mr.)				\$60.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Sugar Land, TX 77498				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Executive Di		Nite FLyer Media	,		
┝			······			

#### MONETARY POLITICAL CONTRIBUTIONS 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 21/23 Rpt: 25/48 2 FILER NAME Filer ID (Ethics Commission Filers) 3 New Blue USA PAC 00086828 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 04/10/2023 Terry, Cindy 6 Contributor address; City; State; Zip Code Memphis, TN 38141 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **Business Application Principal** FedEx Services Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/08/2023 Trimble-Kreutz, Christi Contributor address; City; State; Zip Code Everett, WA 98203 Principal occupation / Job title (See Instructions) Employer (See Instructions) Operations Leadership Preparatory Academy Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:\_ ) 04/08/2023 Von Hollen-Swope, Camilla ..... Contributor address; City; State; Zip Code

	Chattanooga, TN 37421			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	)	
Psychologist		Hcde		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Westbrook, Kevin			\$25.00
Ī	Contributor address; City; State; Zip Code			
	Eureka, CA 95503			
Bringinal occur	bation / Job title (See Instructions)	Employor (Soo Instructions)	N	
not employed		Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/14/2023	Whitson, William L			\$25.00
	Contributor address; City; State; Zip Code			
	Berkeley, CA 94709			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	)	
not employed				

### SCHEDULE A1

\$25.00

\$10.00

\$100.00

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 22/23 Rpt: 26/48 2 FILER NAME Filer ID (Ethics Commission Filers) 3 New Blue USA PAC 00086828 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/02/2023 Williams, Laura \$25.00 6 Contributor address; City; State; Zip Code Greenfield, OH 45123 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/12/2023 Williams, Laura \$25.00 Contributor address; City; State; Zip Code Greenfield, OH 45123 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/14/2023 Williams, Stephen \$25.00 Contributor address; City; State; Zip Code Austin, TX 78703 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/07/2023 \$3.00 barrett, katherine Contributor address; City; State; Zip Code henderson, TX 89011 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed none Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/08/2023 \$25.00 fairfield, gail Contributor address; City; State; Zip Code punta gorda, FL 33955 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 23/23 Rpt: 27/48 2 FILER NAME Filer ID (Ethics Commission Filers) 3 New Blue USA PAC 00086828 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/14/2023 grooms, Ellen \$50.00 6 Contributor address; City; State; Zip Code Washington, DC 20015 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/08/2023 \$25.00 raymundo, marissa Contributor address; City; State; Zip Code seattle, WA 98199 Principal occupation / Job title (See Instructions) Employer (See Instructions) accountant rgp Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/07/2023 smith, jeanine \$100.00 Contributor address; City; State; Zip Code juneau, AK 89011 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/23/2023 \$40.00 taylor, john Contributor address; City; State; Zip Code Sugar Land, TX 77498 Principal occupation / Job title (See Instructions) Employer (See Instructions) director NiteflyerMedia

UNPAID INCU	RRED OBLI	GATIONS			SCHEDULE F2
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Eve Fee Foo - Gift I Committee Leg	EXPENDITURE CAT nt Expense s d/Beverage Expense Awards/Memorials Expense al Services e Instruction Guide exp	Loan Rep Office Ove Polling Ex Printing E Salaries/V	ayment/Reimbursement prhead/Rental Expense pense vpense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F2: Sch: 1/1 Rpt: 28/48	2 FILER NAME New Blue USA	PAC			3 Filer ID (Ethics Commission Filers) 00086828
<sup>4</sup> TOTAL OF UNITEMI	ZED UNPAID IN	CURRED OBLIG	ATIONS		\$
5 Date 06/30/2023	6 Payee name Doug Fulmer &	& Associates			
7 Amount (\$) \$800.00 Expenditure from corporate funds	<ul> <li>8 Payee address;</li> <li>704 PineHurst</li> <li>Mt. Juliet, TN 3</li> </ul>	Pt	State; Zip Co	de	
9 TYPE OF EXPENDITURE	Poli	tical	X Non-Poli	tical	
10 PURPOSE OF EXPENDITURE	(a) Category (See C Advertising Ex	ategories listed at the top of pense	this schedule)		outside of Texas. Complete Schedule T. n, TX, officeholder living expense D WORK
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeh H	older name	Office sou	ght	Office held

Date 04/28/2023 Amount (\$) 42.30 Expenditure from corporate funds PURPOSE OF EXPENDITURE Date 06/14/2023 Amount (\$) Expenditure from corporate funds PURPOSE OF EXPENDITURE Date 06/16/2023 Amount (\$) 2,200.00 Expenditure from	5       Payee name BP 3743481TUSCA;         7       Payee Address; 3800 Clairmont Ave S         blRMINGHAM, AL 35222         (a) Category (See instructions for examples of acception Travel Out of District         Payee name Campaigns by Vicent         Payee Address; 17 Treehouse Trail         Rome, GA 30165         (a) Category (See instructions for examples of acception District         Payee name Campaigns by Vicent         Payee Address; 17 Treehouse Trail         Rome, GA 30165         (a) Category (See instructions for examples of acception Consulting Expense         Payee name Campaigns by Vicent         Payee name         Campaigns by Vicent         Payee Address;       City; State;	ptable categories) (b) Description (See instructions regarding type of information required. GASOLINE ; Zip ptable categories) (b) Description (See instructions regarding type of information required. consultant, compliance
42.30 Expenditure from corporate funds PURPOSE OF EXPENDITURE Date 06/14/2023 Amount (\$) 300.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE Date 06/16/2023 Amount (\$) 2,200.00	3800 Clairmont Ave S         blRMINGHAM, AL 35222         (a) Category (See instructions for examples of acception of District         Payee name         Campaigns by Vicent         Payee Address;       City; State;         17 Treehouse Trail         Rome, GA 30165         (a) Category (See instructions for examples of acception of acception of the state;         Payee name         Category (See instructions for examples of acception of the state;         Payee name         Consulting Expense         Payee name         Campaigns by Vicent         Payee name         Campaigns by Vicent         Payee Address;       City; State;	ptable categories) (b) Description (See instructions regarding type of information required. GASOLINE ; Zip ptable categories) (b) Description (See instructions regarding type of information required. consultant, compliance
Corporate funds  PURPOSE OF EXPENDITURE  Date 06/14/2023  Amount (\$) 300.00 Expenditure from corporate funds  PURPOSE OF EXPENDITURE  Date 06/16/2023  Amount (\$) 2,200.00	(a) Category (See instructions for examples of accept Travel Out of District         Payee name         Campaigns by Vicent         Payee Address;       City; State;         17 Treehouse Trail         Rome, GA 30165         (a) Category (See instructions for examples of accept Consulting Expense         Payee name         Campaigns by Vicent         Payee name         Campaigns by Vicent         Payee Address;       City; State;	; Zip ptable categories) (b) Description (See instructions regarding type of information required. consultant, compliance
OF EXPENDITURE	Travel Out of District         Payee name         Campaigns by Vicent         Payee Address;       City; State;         17 Treehouse Trail         Rome, GA 30165         (a) Category (See instructions for examples of acception for example	; Zip ptable categories) (b) Description (See instructions regarding type of information required. consultant, compliance
06/14/2023 Amount (\$) 300.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE Date 06/16/2023 Amount (\$) 2,200.00	Campaigns by Vicent Payee Address; City; State; 17 Treehouse Trail Rome, GA 30165 (a) Category (See instructions for examples of acception of the second of	ptable categories) <b>(b)</b> Description (See instructions regarding type of information required. consultant, compliance
Amount (\$) 300.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE Date 06/16/2023 Amount (\$) 2,200.00	Payee Address;       City; State;         17 Treehouse Trail         Rome, GA 30165         (a) Category (See instructions for examples of acception of the consulting Expense         Payee name         Campaigns by Vicent         Payee Address;       City; State;	ptable categories) <b>(b)</b> Description (See instructions regarding type of information required consultant, compliance
300.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE Date 06/16/2023 Amount (\$) 2,200.00	17 Treehouse Trail         Rome, GA 30165         (a) Category (See instructions for examples of acception Consulting Expense         Payee name         Campaigns by Vicent         Payee Address;       City; State;	ptable categories) <b>(b)</b> Description (See instructions regarding type of information required consultant, compliance
Date 06/16/2023 Amount (\$) 2,200.00	(a) Category (See instructions for examples of acception of accep	consultant, compliance
OF EXPENDITURE Date 06/16/2023 Amount (\$) 2,200.00	Consulting Expense Payee name Campaigns by Vicent Payee Address; City; State;	consultant, compliance
06/16/2023 Amount (\$) 2,200.00	Campaigns by Vicent Payee Address; City; State;	· Zin
2,200.00		· Zin
		, <b>_</b> p
Expenditure from	17 Treehouse Trail	
corporate funds	Rome, GA 30165	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of accept Consulting Expense	ptable categories) (b) Description (See instructions regarding type of information required consultant/ compliance
Date 04/28/2023	Payee name DAIRY QUEEN 41688	
Amount (\$) 11.97	Payee Address; City; State; 384 Palisades Blvd	; Zip
Expenditure from corporate funds	BIRMINGHAM, AL 35209	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of accept Food/Beverage Expense	ptable categories) (b) Description (See instructions regarding type of information required. MEAL

SCHEDULE I

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 2/20 Rpt:	2 FILER NAME New Blue USA PAC	3 Filer ID (Ethics Commission Filers) 00086828
Date 05/31/2023	5 Payee name Go Daddy	
Amount (\$) 30.16 Expenditure from	7 Payee Address; City; State; Zip 2155 E GoDaddy Way,	
corporate funds PURPOSE OF EXPENDITURE	Tempe, AZ 85284         (a) Category (See instructions for examples of acceptable categories)         Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) email web page support
Date 04/28/2023	Payee name Littons	
Amount (\$) 50.41 Expenditure from	Payee Address; City; State; Zip 2803 Essary Road	
Corporate funds PURPOSE OF EXPENDITURE	Knoxville, TN 37918 (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) meal with Knoxville democratic leadership group -
Date 04/21/2023	Payee name McDonalds	
Amount (\$) 15.76 Expenditure from	Payee Address; City; State; Zip 516 MS-19	
corporate funds PURPOSE OF EXPENDITURE	meridian, MS 39301 (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) food as we drove across USA to promote NewBLU USA
Date	Payee name Olea Olive Oil	
04/26/2023		
	Payee Address; City; State; Zip 424 Broad Street Rome, GA 30161	

	Т	
Total pages Schedule I: Sch: 3/20 Rpt:	2 FILER NAME New Blue USA PAC	3         Filer ID         (Ethics Commission Filers)           00086828         00086828
Date	5 Payee name	
04/28/2023	ROCKY TOP MARKET ATHENS	
Amount (\$) 4.22	7 Payee Address; City; State; Zip 2632 Decatur Pike	
Expenditure from corporate funds	ATHENS, TN 37303	
B PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) DRINKS
Date	Payee name	1
04/24/2023	Super 8 Motel	
Amount (\$) 127.54	Payee Address; City; State; Zip 124 HIGHWAY 11 AND 80	
Expenditure from corporate funds	Meridan, MS 37901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required. overnight stay in Mississippi on way to North Georgia, Tennessee for meetings with Deomocrat
Date	Payee name	
04/24/2023	Super 8 Motel	
Amount (\$)	Payee Address; City; State; Zip	
15.00	124 Highway 11 and 80 Ea	
Expenditure from corporate funds	Meridain, MS 37901	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required. fees at hotel
Date	Payee name	
02/23/2023	Taylor, Marty	
Amount (\$)	Payee Address; City; State; Zip	
40.00	12100 S hwy 6 apt 9205	
Expenditure from corporate funds	Sugar Land, TX 77498	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required. meal while traveling

Total pages Schedule I: Sch: 4/20 Rpt:	2 FILER NAME New Blue USA PAC	3 Filer ID (Ethics Commission Filers 00086828
Date 06/09/2023	5 Payee name Taylor, Marty	
Amount (\$) 100.00 Expenditure from	7 Payee Address; City; State; Zip 12100 S hwy 6 apt 9205	
Corporate funds PURPOSE OF EXPENDITURE	Sugar Land, TX 77498 (a) Category (See instructions for examples of acceptable categories) Travel In District	(b) Description (See instructions regarding type of information required. food and gas to Midland/Odessa chair to meet with democrat operatives
Date 04/20/2023 Amount (\$)	Payee name USPS Payee Address; City; State; Zip	<u> </u>
107.30 Expenditure from corporate funds	225 maitland way sugar land, TX 77498	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required. postage to mail out mtg whistles
Date 04/28/2023	Payee name WEIGLES 58 Q88 504	1
Amount (\$) 40.00 Expenditure from corporate funds	Payee Address; City; State; Zip GALLERHER ROAD KINGSTON, TN 37763	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required. gasoline
Date 04/27/2023	Payee name applebees	1
Amount (\$) 79.45 Expenditure from corporate funds	Payee Address; City; State; Zip walnut avenue dalton, GA 30720	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. meeting with Karla spanish translator

SCHEDULE I

Sch: 5/20 Rpt:     New Blue USA PAC     00086828       Date     5     Payee name     arbys       Amount (\$)     7     Payee Address;     City; State; Zip       16.04     3430 Buttermilk R		The Instruction Guide explains how to	complete this form.
04/28/2023     arbys       Anount (\$)     7     Payse Address; 3430 Buttermilk R       Expenditure from contondale, AL 35453     City: State; Zip 3430 Buttermilk R       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories of EXPENDITURE     (b) Description (See instructions regarding type of information regarding type of information regarding type of information regarding meal       Date     Payse name atlanta bread company       Anount (\$)     Payse Address; 6000 North Terminal Parkway       Expenditure from corporate funds     atlanta, GA 30320       PURPOSE EXPENDITURE     (a) Category (See instructions for examples of acceptable categories of EXPENDITURE     (b) Description (See instructions regarding type of information required meal       Date     Payse Address; City: State; Zip Travel Out of District     (b) Description (See instructions regarding type of information required meal in airport       Date     Payse name 03/27/2023     best huy       Amount (\$)     Payse Address; City: State; Zip 16900 Southwest Fwy sugar land, TX 77499       PURPOSE EXPENDITURE     (a) Category (See instructions for examples of acceptable categories Office Overhead/Rental Expense       Date     Payse name 04/28/2023       Date     Payse name 04/28/2023       Date     Payse address; City: State; Zip 17.83       Expenditure from corporate kinds     category (See instructions for examples of acceptable categories Office Overhead/Rental Expense			
16.04     3430 Buttermilk R       corporate funds     cottondale, AL 35453       PURPOSE     (a) Category (See instructions for examples of acceptable categories)     (b) Description     (See instructions regarding type of information required meal       Date     Payee name       02/28/2023     atlanta bread company       Amount (\$)     Payee Address;     City; State; Zip       15.00     6000 North Terminal Parkway       Expenditure from     atlanta, GA 30320       PURPOSE     Travel Out of District     (b) Description       Cate     Payee name       03/27/2023     best buy       Amount (\$)     Payee name       03/27/2023     best buy       Amount (\$)     Payee Address;       16:900     Southwest Fwy       Expenditure from     sugar land, TX 77499       PURPOSE     Office Overhead/Rental Expense       Office Overhead/Rental Expense     (b) Description       Category (See instructions for examples of acceptable categories)     (b) Description       Category (See instructions for examples of acceptable categories)     (b) Description       03/27/2023     best buy       Amount (\$)     Payee Address;       City; State;     Zip       79.00     16980 Southwest Fwy       Expenditure from     category (See instructions for examp			
corporate funds       cottondale, AL 35433         PURPOSE OF EXPENDITURE       (a) Category (see instructions for examples of acceptable categories)       (b) Description meal       (See instructions regarding type of information required meal         Date 02/28/2023       Payee name atlanta bread company       Payee Address; 000 North Terminal Parkway       (b) Description       (See instructions regarding type of information required meal         15.00       Payee Address; 000 North Terminal Parkway       (b) Description       (See instructions regarding type of information required meal         OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required meal in airport         Date 03/27/2023       Payee name best buy       (b) Description       (See instructions regarding type of information required meal         79.00       16980 Southwest Fwy 16980 Southwest Fwy       (b) Description       (See instructions regarding type of information required monitor cable for ipad         Date 04/28/2023       Payee name (A/28/2023       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required monitor cable for ipad         Date 04/28/2023       Payee name (A/28/2023       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required	16.04		
OF EXPENDITURE     Food/Beverage Expense     meal       Date     Payee name       02/28/2023     atlanta bread company       Amount (\$)     Payee Address; City; State; Zip       15.00     6000 North Terminal Parkway       Expenditure from     atlanta, GA 30320       PURPOSE     (a) Category (See instructions for examples of acceptable categories)       Of     Travel Out of District       Travel Out of District     meal       Date     Payee name       03/27/2023     best buy       Amount (\$)     Payee Address; City; State; Zip       79.00     16980 Southwest Fwy       Expenditure from     sugar land, TX 77499       PURPOSE     (a) Category (See instructions for examples of acceptable categories)       Office Overhead/Rental Expense     (b) Description       Oate     Payee name       04/28/2023     big eds pizza       Amount (\$)     Payee name       04/28/2023     big eds pizza       17.83     jackson plaza       Corporate funds     category (See instructions for examples of acceptable categories)       0     Category (See instructions for examples of acceptable categories)       04/28/2023     big eds pizza       17.83     jackson plaza       Corporate funds     (a) Category (See instructions for examples of acceptabl	1 .	cottondale, AL 35453	
02/28/2023       atlanta bread company         Amount (\$)       Payee Address; City; State; Zip         15.00       6000 North Terminal Parkway         atlanta, GA 30320       atlanta, GA 30320         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required meal in airport         Date       Payee name       meal in airport         03/27/2023       Payee Address; City; State; Zip       folde times and the set buy         Amount (\$)       Payee Address; City; State; Zip       folde corporate funds         03/27/2023       Payee name       sugar land, TX 77499         PURPOSE       Of       Office Overhead/Rental Expense       (b) Description (See instructions regarding type of information required monitor cable for ipad         Date       OF       Office Overhead/Rental Expense       (b) Description (See instructions regarding type of information required monitor cable for ipad         Date       Payee name       Office Overhead/Rental Expense       monitor cable for ipad         04/28/2023       big eds pizza       Amount (\$)       Payee Address; City; State; Zip       fold Market and fold for ipad         17.83       jackson plaza       oak ridge, TN 37830       (b) Description (See instructions regarding type of information required meal         OF <td>OF</td> <td></td> <td></td>	OF		
Amount (\$)       Payee Address;       City; State; Zip         15.00       15.00         Expenditure from corporate funds       atlanta, GA 30320         PURPOSE OF EXPENDITURE       (a) Category (see instructions for examples of acceptable categories) Travel Out of District       (b) Description       (See instructions regarding type of information required meal in airport         Date 03/27/2023       Payee name 03/27/2023       Payee name 05/27/2023       Payee Address;       City; State; Zip 16980 Southwest Fwy         Sugar land, TX 77499       16980 Southwest Fwy 1600 Corporate funds       sugar land, TX 77499         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense       (b) Description       (See instructions regarding type of information required monitor cable for ipad         Date 04/28/2023       Payee name big eds pizza       Date Amount (\$)       Payee Address; 17.83       City; State; Zip jackson plaza         Expenditure from Corporate funds       oak ridge, TN 37830       (b) Description       (See instructions regarding type of information required monitor cable for ipad         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories) (b) Description       (See instructions regarding type of information required monitor cable for ipad	Date	Payee name	
15.00       6000 North Terminal Parkway         atlanta, GA 30320       atlanta, GA 30320         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required meal in airport         Date       Payee name       best buy         Amount (\$)       Payee Address; City; State; Zip       (b) Description (See instructions regarding type of information required meal in airport         Zxpenditure from       sugar land, TX 77499       (b) Description (See instructions regarding type of information required monitor cable for ipad         PuRPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required monitor cable for ipad         purpose       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required monitor cable for ipad         Date       Payee name       (b) Description (See instructions regarding type of information required monitor cable for ipad         Date       Payee name       (b) description (See instructions regarding type of information required monitor cable for ipad         17.83       jackson plaza       (b) Description (See instructions regarding type of information required monitor cable for ipad         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (	02/28/2023	atlanta bread company	
_ corporate funds       atlanta, GA 30320         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description (See instructions regarding type of information required meal in airport         Date       Payee name         03/27/2023       best buy         Amount (\$)       Payee Address; City; State; Zip         1 6980 Southwest Fwy	15.00		
OF EXPENDITURE     Travel Out of District     meal in airport       Date     Payee name       03/27/2023     best buy       Amount (\$)     Payee Address; City; State; Zip       79.00     16980 Southwest Fwy       Expenditure from corporate funds     sugar land, TX 77499       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense     (b) Description     (See instructions regarding type of information required monitor cable for ipad       Date     Payee name       04/28/2023     big eds pizza       Amount (\$)     Payee Address; City; State; Zip       17.83     jackson plaza       Expenditure from corporate funds     oak ridge, TN 37830       PURPOSE OF     (a) Category (See instructions for examples of acceptable categories) OF     (b) Description		atlanta, GA 30320	
03/27/2023       best buy         Amount (\$)       Payee Address;       City; State; Zip         79.00       16980 Southwest Fwy         generative from       sugar land, TX 77499         corporate funds       sugar land, TX 77499         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required monitor cable for ipad         Date       Payee name       office of pizza       Mount (\$)       Payee Address;       City; State; Zip         Amount (\$)       Payee Address;       City; State; Zip       Integration of the pizza       Integrative from         fexpenditure from       oak ridge, TN 37830       City; State; Zip       Integrating type of information required monitor categories)         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required monitor categories)         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required meal	OF		
Amount (\$)       Payee Address;       City;       State;       Zip         79.00       16980 Southwest Fwy       16980 Southwest Fwy         Image: Sependiture from corporate funds       sugar land, TX 77499       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required monitor cable for ipad         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required monitor cable for ipad         Date 04/28/2023       Payee name big eds pizza       big eds pizza         Amount (\$)       Payee Address; City; State; Zip jackson plaza       T7.83         Expenditure from corporate funds       oak ridge, TN 37830       (b) Description (See instructions regarding type of information required monitor required monitor regarding type of information required monitor required monitor regarding type of information required monitor cable for ipad         04/28/2023       Date os is right and the payee address; City; State; Zip jackson plaza       (b) Description (See instructions regarding type of information required monitor capital payee address; City; State; Zip jackson plaza         0F       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required monitor required monitor required monitor required monitor capital payee address; City; State; Zip Jackson plaza         0F	Date	Payee name	
79.00       16980 Southwest Fwy         Expenditure from corporate funds       sugar land, TX 77499         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense       (b) Description (See instructions regarding type of information required monitor cable for ipad         Date 04/28/2023       Payee name big eds pizza       big eds pizza         Amount (\$)       Payee Address; 17.83       City; State; Zip jackson plaza         Expenditure from corporate funds       oak ridge, TN 37830         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description (See instructions regarding type of information required monitor cable for ipad	03/27/2023	best buy	
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense       (b) Description (See instructions regarding type of information required monitor cable for ipad         Date 04/28/2023       Payee name big eds pizza	Amount (\$)	Payee Address; City; State; Zip	
corporate funds       sugar land, TX 77499         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense       (b) Description (See instructions regarding type of information required monitor cable for ipad         Date       Payee name         04/28/2023       big eds pizza         Amount (\$)       Payee Address; City; State; Zip jackson plaza         17.83       category (See instructions for examples of acceptable categories) oak ridge, TN 37830         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	79.00	16980 Southwest Fwy	
OF EXPENDITURE       Office Overhead/Rental Expense       monitor cable for ipad         Date       Payee name       -         04/28/2023       big eds pizza       -         Amount (\$)       Payee Address; City; State; Zip       -         17.83       jackson plaza       -         Expenditure from corporate funds       oak ridge, TN 37830       -         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required meal		sugar land, TX 77499	
Date     Payee name       04/28/2023     big eds pizza       Amount (\$)     Payee Address; City; State; Zip       17.83     jackson plaza       Oak ridge, TN 37830       PURPOSE     (a) Category (See instructions for examples of acceptable categories)     (b) Description meal     (See instructions regarding type of information required meal	OF		
04/28/2023       big eds pizza         Amount (\$)       Payee Address;       City; State; Zip         17.83       jackson plaza         Expenditure from corporate funds       oak ridge, TN 37830         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories)       (b) Description meal         Food/Beverage Expense       (b) Description meal       (See instructions regarding type of information required meal			
Amount (\$)       Payee Address; City; State; Zip jackson plaza         17.83       jackson plaza         Expenditure from corporate funds       oak ridge, TN 37830         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories)         OF       Food/Beverage Expense	Date	Payee name	
17.83     jackson plaza       Expenditure from corporate funds     oak ridge, TN 37830       PURPOSE OF     (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense     (b) Description meal     (See instructions regarding type of information required meal	04/28/2023	big eds pizza	
Image: Transmitted state       Expenditure from corporate funds       oak ridge, TN 37830         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required meal	Amount (\$)	Payee Address; City; State; Zip	
corporate funds     oak ridge, TN 37830       PURPOSE OF     (a) Category (See instructions for examples of acceptable categories)     (b) Description meal     (See instructions regarding type of information required meal	17.83	jackson plaza	
PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required         OF       Food/Beverage Expense       meal		oak ridge. TN 37830	
OF Food/Beverage Expense meal	•		(b) Description (See instructions regarding type of information required.
	OF		

Date 02/11/2023 Amount (\$)	5 Payee name bode	
Amount (\$)		
278.65 Expenditure from	7 Payee Address; City; State; Zip 730 chestnut st	
corporate funds	Chattanooga, TN 37402	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required. hotel room in Chattanooga, TN for meetings
Date	Payee name	
02/11/2023	bode	
Amount (\$) 244.52	Payee Address; City; State; Zip 730 chestnut ave	
Expenditure from corporate funds	Chattanooga, TN 37402	
PURPOSE OF EXPENDITURE	-	(b) Description (See instructions regarding type of information required. Hotel in Chattanooga, TN to meet with TN, GA pac
Date	Payee name	
04/21/2023	bucees	
Amount (\$) 16.19	Payee Address;City; State; Zip4080 East Fwy	
Expenditure from corporate funds	houston, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. food on trip as we drove across US to promote NEWBLUEUSA
Date	Payee name	
04/29/2023	bucees	
Amount (\$) 18.34	Payee Address; City; State; Zip 4080 east freeway	
Expenditure from corporate funds	bay town, TX 77521	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. meal

	The Instruction Guide explains how to	
Total pages Schedule I: Sch: 7/20 Rpt:	2 FILER NAME New Blue USA PAC	3 Filer ID (Ethics Commission Filers) 00086828
Date 04/24/2023	5 Payee name burger king	
Amount (\$) 8.79	7 Payee Address; City; State; Zip 2111 SW Railroad Avenue	
Expenditure from corporate funds	hammond, TX 70403	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) food as we drove across USA to promote NewBlueUSA
Date	Payee name	L
04/28/2023	burger king	
Amount (\$) 16.99	Payee Address; City; State; Zip 319 Merchant Dr	
Expenditure from corporate funds	knoxville, TN 37912	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) meal while traveling
Date	Payee name	I
04/28/2023	chick-A-FILLET03639	
Amount (\$) 19.53	Payee Address;City; State; Zip11068 Parkside Dr	
Expenditure from corporate funds	KNOXVILLE, TN 37954	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) MEAL
Date	Payee name	
04/27/2023	cracker b arrell	
Amount (\$) 18.74	Payee Address; City; State; Zip CAMBELL STATION ROAD	
Expenditure from	knoxville, TN 37919	
corporate funds	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.) meal

Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers
Sch: 8/20 Rpt:	New Blue USA PAC	00086828
Date 04/24/2023	5 Payee name dairy queen	
Amount (\$)	7 Payee Address; City; State; Zip	
9.44	2110 Us 41 Hwy Ne	
Expenditure from corporate funds	Calhoun, GA 30701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. meal while in Calhoun, ga
Date	Payee name	
02/10/2023	delta	
Amount (\$)	Payee Address; City; State; Zip	
686.40	1020 Cargo Service Rd	
Expenditure from corporate funds	Atlanta, TX 30337	
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Travel Out of District	Trip to Chattanooga , TN to meet with chattanooga democrats, north ga democrats
Date	Payee name	
03/11/2023	delta	
Amount (\$)	Payee Address; City; State; Zip	
889.40	1020 Cargo Service Rd	
Expenditure from corporate funds	Atlanta, TX 30337	
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Travel Out of District	ticket for travel to N GA meeting and Chattanooga with dems.
Date	Payee name	
04/24/2023	dominos	
Amount (\$)	Payee Address; City; State; Zip	
32.66	2535 N Hills St Unit B	
Expenditure from corporate funds	meridan, MS 37305	
	· · · · · · · · · · · · · · · · · · ·	(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Food/Beverage Expense	supper meridan mississippi
	1	1

Total pages Schedule I: Sch: 9/20 Rpt:	2 FILER NAME New Blue USA PAC	3 Filer ID (Ethics Commission Filers 00086828
Date 04/25/2023	5 Payee name dominos	
Amount (\$) 22.98 Expenditure from	7 Payee Address; City; State; Zip 430 Red Bud Rd NE calhoun, GA 30701	
Corporate funds PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categorie Food/Beverage Expense	(b) Description (See instructions regarding type of information required. meal in Calhoun, ga
Date 04/24/2023	Payee name el pubelito	
Amount (\$) 70.95 Expenditure from	Payee Address; City; State; Zip 206 S Park AvE	
Corporate funds PURPOSE OF EXPENDITURE	calhoun, TX 30701 (a) Category (See instructions for examples of acceptable categorie Food/Beverage Expense	( <b>b</b> ) Description (See instructions regarding type of information required. meeting with Spanish translator Karla
Date 03/27/2023	Payee name gannet news papaer	
Amount (\$) 1.06 Expenditure from corporate funds	Payee Address; City; State; Zip 1100 Broadway nashville, TN 37203	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categorie Fees	(b) Description (See instructions regarding type of information required. tennessee newspaper to keep us up to date on tennessee events
Date 05/31/2023	Payee name go daddy	
Amount (\$) 21.16 Expenditure from corporate funds	Payee Address; City; State; Zip 2155 e godaddy wat tempe, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categorie Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) domain for another year

Date       5       Payee name hamilton inn suites         Amount (\$)       7       Payee Address;       City; State; Zip hmailton place drive         325.63       25.63       Chattanooga, TN 37421         PURPOSE of EXPENDITURE       (a) Category (see instructions for examples of acceptable categories) OF EXPENDITURE       (b) Description       (See instructions regarding type of information require meeting in Chattanooga         Date 03/11/2023       Payee name hampton inn suites       (b) Description       (See instructions regarding type of information require meeting in Chattanooga         Expenditure from corporate funds       Payee Address;       City; State; Zip hamilton place drive       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, TN 37421         PURPOSE ocrporate funds       Chattanooga, TN 37421       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date 0/4/28/2023       Payee name hardees 1501851       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date 0/4/28/2023       Payee name hardees 1501851       (State; Zip cambell station road knoxville, TN 37919       (State; Zip	Total pages Schedule I: Sch: 10/20 Rpt:	2 FILER NAME New Blue USA PAC	3 Filer ID (Ethics Commission Filers) 00086828
Amount (\$)       7       Payee Address;       City; State; Zip         State indication of the instructions of acceptable categories       (b) Description       (See instructions regarding type of information require meeting in Chattanooga         PURPOSE EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information require meeting in Chattanooga         Date       Payee name       hampton inn suites         Amount (\$)       Payee Address;       City; State; Zip         S99,03       hamilton place drive       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, TN 37421         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, th, North GA, amicola         Date       Payee name       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, th, North GA, amicola         Date       Payee name       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, th, North GA, amicola         Corporate funds       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information require	•		
325.63     hmailton place drive Chattanooga, TN 37421       PURPOSE EXPENDITURE     (a) Category Gee instructions for examples of acceptable categories) Travel Out of District     (b) Description meeting in Chattanooga       Date 03/11/2023     Payee name hampton inn suites     Payee address; Sependiture from corporate funds     City; State; Zip hamilton place drive       Expenditure from corporate funds     Chattanooga, TN 37421       PURPOSE EXPENDITURE     (a) Category Gee instructions for examples of acceptable categories) corporate funds     (b) Description Chattanooga, TN 37421       PURPOSE EXPENDITURE     (a) Category Gee instructions for examples of acceptable categories) Travel Out of District     (b) Description (See instructions regarding type of information regarding meeting in Chattanooga, th, North GA, amicola       Date 04/28/2023     Payee name hardees 1501851     Mountt (§)     Payee name knoxville, TN 37919       PURPOSE EXPENDITURE     (a) Category Gee instructions for examples of acceptable categories) Food/Beverage Expense     (b) Description (See instructions regarding type of information regarding meeting in Chattanooga, th, North GA, amicola       Date 03/20/2023     (a) Category Gee instructions for examples of acceptable categories) Food/Beverage Expense     (b) Description (See instructions regarding type of information regarding meeting       Date 02F     Payee name his chattanooga     (b) Description (See instructions regarding type of information regarding meeting       Date 02F     Payee Address; 12.00     City; State; Zip 2014 Hamilton Place Blvd chatt	03/24/2023	hamilton inn suites	
S23.03       Chattanooga, TN 37421         PURPOSE or portate funds       (a) Category (See instructors for examples of acceptable categories)       (b) Description       (See instructors regarding type of information require meeting in Chattanooga         Date       Payee name       hampton inn suites         Arnount (\$)       Payee Address;       City; State; Zip         Septenditure from corporate funds       Chattanooga, TN 37421         PURPOSE expenditure from corporate funds       (b) Description       (See instructors regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       (b) Description       (See instructors regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       (b) Description       (See instructors regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       (b) Description       (See instructors regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Bate       Payee Address;       City; State; Zip       (b) Description       (See instructors regarding type of information require meeting         03/20/2023       hardees 1501851       (b) Description       (See instructors regarding type of information require meat         Date       Payee name       (a) Category (See instructors for examples of acceptable categ	Amount (\$)	7 Payee Address; City; State; Zip	
Loroporate funds       Chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information require meeting in Chattanooga         Date 03/11/2023       Payee name hampton inn suites       Payee Address; City; State; Zip hamilton place drive       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) OF EXPENDITURE       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, In, North GA, amicola         Date 04/28/2023       Payee name hardees 1501851       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, In, North GA, amicola         Date 04/28/2023       Payee name hardees 1501851       (hoxxville, TN 37919         PURPOSE EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) OF EXPENDITURE       (b) Description       (See instructions regarding type of information require meal         Date 04/28/2023       Payee name hardees 1501851       (b) Description       (See instructions regarding type of information require meal         Date 05/7       Payee name his chattanooga       (his chattanooga       (his chattanooga         Date 05/7       Payee name his chattanooga, TN 37421       (b	325.63	hmailton place drive	
PURPOSE CF EXPENDITURE       (a) Category (see instructions for examples of acceptable categories)       (b) Description       (see instructions regarding type of information require meeting in Chattanooga         Date       Payee name       hampton inn suites         Amount (\$)       Payee Address;       City; State; Zip         S99.03       Corporate funds       Chattanooga, TN 37421         PURPOSE       (a) Category (see instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       (hardees 1501851         Amount (\$)       Payee Address;       City; State; Zip         18.11       cambell station road       (See instructions regarding type of information require meal         Oate       Payee name       (b) Description       (See instructions regarding type of information require meal         Date       Payee name       (b) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of inform		Chattanooga TN 37421	
OF EXPENDITURE     Travel Out of District     meeting in Chattanooga       Date     Payee name       03/11/2023     hampton inn suites       Amount (\$)     Payee Address; City; State; Zip       599.03     Payee Address; City; State; Zip       599.03     Chattanooga, TN 37421       PURPOSE     (a) Category (See instructions for examples of acceptable categories)     (b) Description     (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola       Date     Payee name       04/28/2023     hardees 1501851       Amount (\$)     Payee Address; City; State; Zip       18.11     cambell station road       Issee tunds     knoxville, TN 37919       PURPOSE     (a) Category (See instructions for examples of acceptable categories)       03/20/2023     Nis chattanooga       Date     Payee name       03/20/2023     his chattanooga       Date     Payee name       03/20/2023     his chattanooga       Norunt (\$)     Payee name       03/20/2023     Payee name       12.00     2014 Hamilton Place Blvd       Expenditure from     chattanooga, TN 37421       PURPOSE     (a) Category (See instructions for examples of acceptable categories)       Date     Payee name       03/20/2023     his chattanooga   <	•	-	(b) Description (See instructions regarding type of information required.)
03/11/2023       hampton inn suites         Amount (\$)       Payee Address; City: State; Zip         599.03       hamilton place drive         Syg.03       Chattanooga, TN 37421         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       hardees 1501851         Amount (\$)       Payee Address; City: State; Zip       categories (b) Description (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Expenditure from corporate funds       Payee name       (b) Description (See instructions regarding type of information require of or possible (b) Description (See instructions regarding type of information require of or possible (for the set of the set	OF		
Amount (\$)       Payee Address;       City; State; Zip         599.03       Superditure from       Chattanooga, TN 37421         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       hardees 1501851         Amount (\$)       Payee name       hardees 1501851         Amount (\$)       Payee address;       City; State; Zip         cambell station road       knoxville, TN 37919         PURPOSE       (b) Description       (See instructions regarding type of information require meeting         of Expenditure from       knoxville, TN 37919       (b) Description       (See instructions regarding type of information require meeting         OA       OA/Beverage Expense       Oal/Beverage Expense       (b) Description       (See instructions regarding type of information require meeting         03/20/2023       his chattanooga       Amount (\$)       Payee name       (b) Description       (See instructions regarding type of information require meeting         03/20/2023       his chattanooga       City; State; Zip       (b) Description       (See instructions regarding type of information require meeting         02/20203       his chattanooga, TN 37421       (b) Description       (See in	Date	Payee name	
599.03       hamilton place drive         Expenditure from corporate funds       Chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       (d) 28/2023       hardees 1501851         Amount (\$)       Payee Address;       City; State; Zip       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         PURPOSE or particular from corporate funds       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description meal       (See instructions regarding type of information require meal         Date       Payee name his chattanooga       Payee name his chattanooga       (b) Description       (See instructions regarding type of information require meal         Date       Payee name his chattanooga       Payee Address;       City; State; Zip       (b) Description       (See instructions regarding type of information require meal         PURPOSE of       (a) Category (See instructions for examples of acceptable categories) food/Beverage Expense       (b) Description       (See instructions regarding type of information require meal	03/11/2023	hampton inn suites	
S99.03       Chattanooga, TN 37421         PURPOSE Corporate funds       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date O4/28/2023       Payee name hardees 1501851       (b) Description (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Amount (\$)       Payee Address; City; State; Zip cambell station road       City; State; Zip         Expenditure from corporate funds       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meal         Date       Payee name       (b) Description (See instructions regarding type of information require meal         Corporate funds       knoxville, TN 37919       (b) Description (See instructions regarding type of information require meal         Date       Payee name       (b) Description (See instructions regarding type of information require meal         03/20/2023       his chattanooga       Amount (\$)       Payee Address; City; State; Zip         12.00       2014 Hamilton Place Blvd       chattanooga, TN 37421         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meal         PURPOSE       (a) Category (See instructions for examples of a	Amount (\$)	Payee Address; City; State; Zip	
_ corporate funds       Chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name hardees 1501851       Payee Address; City; State; Zip cambell station road       (b) Description (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date 0F EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meal         Date 03/20/2023       Payee name his chattanooga       (if) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meal         Date 03/20/2023       Payee name his chattanooga       2014 Hamilton Place Blvd chattanooga, TN 37421       (b) Description (See instructions regarding type of information require meal         PURPOSE 0F       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meal	599.03	hamilton place drive	
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description       (See instructions regarding type of information require meeting in Chattanooga, tn, North GA, amicola         Date       Payee name       hardees 1501851         Amount (\$)       Payee Address; cambell station road       City; State; Zip         18.11       cambell station road         Expenditure from corporate funds       knoxville, TN 37919         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description meal       (See instructions regarding type of information require meal         Date       Payee name       (a) Category (See instructions for examples of acceptable categories)       (b) Description meal       (See instructions regarding type of information require meal         Date       Payee name       (a) Category (See instructions for examples of acceptable categories)       (b) Description meal       (See instructions regarding type of information require meal         03/20/2023       his chattanooga       This chattanooga       (D) Corporate funds       (D) Description meal       (See instructions regarding type of information require meal         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories)       (b) Description meal       (See instructions regarding type of information require meal		Chattanooga, TN 37421	
EXPENDITURE       Interview of or bisinet       Interview of or bisinet       Interview of or bisinet         Date       Payee name         04/28/2023       hardees 1501851         Amount (\$)       Payee Address; City; State; Zip         18.11       cambell station road         Expenditure from       knoxville, TN 37919         PURPOSE       (a) Category (See instructions for examples of acceptable categories)         Food/Beverage Expense       (b) Description         Date       Payee name         03/20/2023       his chattanooga         Amount (\$)       Payee Address; City; State; Zip         12.00       Payee Address; City; State; Zip         2014 Hamilton Place Blvd       campenditure from         corporate funds       chattanooga, TN 37421         PURPOSE       (a) Category (See instructions for examples of acceptable categories)         0F       (See instructions regarding type of information require form	•		(b) Description (See instructions regarding type of information required.)
04/28/2023       hardees 1501851         Amount (\$)       Payee Address;       City; State; Zip         18.11       cambell station road         Expenditure from corporate funds       knoxville, TN 37919         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description meal       (See instructions regarding type of information require meal         Date 03/20/2023       Payee name his chattanooga       his chattanooga         Amount (\$)       Payee Address;       City; State; Zip 2014 Hamilton Place Blvd         Expenditure from corporate funds       chattanooga, TN 37421       (b) Description (See instructions regarding type of information require meal         PURPOSE 0F       (a) Category (See instructions for examples of acceptable categories) (b) Description meal       (See instructions regarding type of information require meal			meeting in Chattanooga, tn, North GA, amicola fa
Amount (\$)       Payee Address;       City; State; Zip         18.11       cambell station road         Expenditure from corporate funds       knoxville, TN 37919         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description meal       (See instructions regarding type of information require meal         Date 03/20/2023       Payee name his chattanooga       Payee Address;       City; State; Zip 2014 Hamilton Place Blvd         Expenditure from corporate funds       Payee Address;       City; State; Zip 2014 Hamilton Place Blvd       (See instructions regarding type of information require meal         PURPOSE 0F       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meal	Date	Payee name	
18.11       cambell station road         Expenditure from corporate funds       knoxville, TN 37919         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description meal       (See instructions regarding type of information require meal         Date 03/20/2023       Payee name his chattanooga       his chattanooga         Amount (\$)       Payee Address; 12.00       City; State; Zip 2014 Hamilton Place Blvd         Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	04/28/2023	hardees 1501851	
18.11       Expenditure from corporate funds       knoxville, TN 37919         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description meal       (See instructions regarding type of information require meal         Date       Payee name       his chattanooga       his chattanooga         Amount (\$)       Payee Address; City; State; Zip       2014 Hamilton Place Blvd         12.00       Expenditure from corporate funds       (a) Category (See instructions for examples of acceptable categories)         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information require meal	Amount (\$)	Payee Address; City; State; Zip	
corporate funds       knoxville, TN 37919         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description meal       (See instructions regarding type of information require meal         Date       Payee name	18.11	cambell station road	
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description meal       (See instructions regarding type of information require meal         Date       Payee name		knoxville, TN 37919	
EXPENDITURE       Provenage Expense       Integration         Date       Payee name       Payee name         03/20/2023       his chattanooga       Payee Address;       City; State; Zip         12.00       2014 Hamilton Place Blvd       chattanooga, TN 37421         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information require meal			(b) Description (See instructions regarding type of information required.)
03/20/2023       his chattanooga         Amount (\$)       Payee Address;       City; State; Zip         12.00       2014 Hamilton Place Blvd         Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description meal			
Amount (\$)       Payee Address;       City;       State;       Zip         12.00       2014 Hamilton Place Blvd       2014 Hamilton Place Blvd         Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE OF       (a) Category (See instructions for examples of acceptable categories)       (b) Description meal       (See instructions regarding type of information requirements)	Date	Payee name	
12.00     2014 Hamilton Place Blvd       Expenditure from corporate funds     chattanooga, TN 37421       PURPOSE OF     (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense     (b) Description meal     (See instructions regarding type of information required meal	03/20/2023	his chattanooga	
L2.00     Expenditure from chattanooga, TN 37421       PURPOSE OF     (a) Category (See instructions for examples of acceptable categories)       (b) Description     (See instructions regarding type of information require meal	Amount (\$)	Payee Address; City; State; Zip	
Corporate funds     chattanooga, TN 37421       PURPOSE OF     (a) Category (See instructions for examples of acceptable categories)     (b) Description     (See instructions regarding type of information require meal	12.00	2014 Hamilton Place Blvd	
PURPOSE OF       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required meal		chattanooga TN 37421	
OF Food/Beverage Expense meal	•		(b) Description (See instructions regarding type of information required)
	OF		-

SCHEDULE I

Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers
Sch: 11/20 Rpt:	New Blue USA PAC	00086828
Date	5 Payee name	
03/20/2023	his chattanooga	
Amount (\$)	7 Payee Address; City; State; Zip	
8.00	hamilton place blvd	
Expenditure from corporate funds	chattanooga, TN 37421	
	-	(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Food/Beverage Expense	snacks during meeting in Chattanooga th
EXPENDITORE		
Date	Payee name	
06/17/2023	holiday day inn suites	
Amount (\$)	Payee Address; City; State; Zip	
287.22	32 E Main St	
Expenditure from	Dalogna, GA 30533	
corporate funds PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.
OF	Travel Out of District	Meeting North Georgia Democrats
EXPENDITURE		
Date	Payee name	
06/13/2023	ivideo	
Amount (\$)	Payee Address; City; State; Zip	
49.95	One Apple Park Way	
Expenditure from corporate funds	Cupertino, CA 95014	
	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.
OF	Office Overhead/Rental Expense	video editing software for rough drafts of
EXPENDITURE		commericials supporting democrats all over US
Date	Payee name	
	j alexander	
03/22/2023		
03/22/2023 Amount (\$)	Payee Address; City; State; Zip	
Amount (\$) 103.00		
Amount (\$) 103.00 Expenditure from	Payee Address; City; State; Zip	
Amount (\$) 103.00	Payee Address; City; State; Zip 2215 Hamilton Place Blvd chattanooga, TN 37421	(b) Description (See instructions regarding type of information required.
Amount (\$) 103.00 Expenditure from corporate funds	Payee Address; City; State; Zip 2215 Hamilton Place Blvd	(b) Description (See instructions regarding type of information required. meal with tennessee pac chair, mayor of chattanooga, iwee

OF EXPENDITURE     Travel Out of District       Date     Payee name       04/24/2023     mcdonals       Amount (\$)     Payee Address;     City; State; Zip       14.02     516 MS-19       Expenditure from corporate funds     meridan , MS 39301	' "	FILER NAME		3 Filer ID (Ethics Commission File
04/24/2023     kroger 5393       Amount (\$)     7     Payee Address;     City; State; Zip       40.00     136 W Belmont D       Expenditure from carbonate funds     calhoun, GA 30701       PURPOSE OF EXPENDITURE     (a) Category (see instructions for examples of acceptable categories)     (b) Description     Ges instructions regarding type of information food /Snacks for meetings at hote!       Date 04/27/2023     Payee name     (a) Category (see instructions for examples of acceptable categories)     (b) Description     Ges instructions regarding type of information food /Snacks for meetings at hote!       Date 04/27/2023     Payee name     (b) Description     Ges instructions regarding type of information food/Beverage Expense       PURPOSE Expenditure from corporate funds     (a) Category (see instructions for examples of acceptable categories)     (b) Description     Ges instructions regarding type of information meal on road to north ga democrats       Date 04/30/2023     Payee name food/Beverage Expense     (b) Description     Ges instructions regarding type of information meal on road to north ga democrats       Travel Out of District     City; State; Zip     (b) Description     Ges instructions regarding type of information meal on road to north ga democrats       PURPOSE 0C     (a) Category Ges instructions for examples of acceptable categories)     (b) Description     Ges instructions regarding type of information hotel room       PURPOSE 0C     (a) Category Ges instructions for examples of				00086828
Amount (\$)       7       Payee Address;       City; State; Zip         40.00       136 W Belmont D         Isoporate funds       calhoun, GA 30701         PURPOSE       (a) Category (See instructors for examples of acceptable categories)       (b) Description       (See instructions regarding type of information food /snacks for meetings at hotel         Date       Payee name       Krystals       food /snacks for meetings at hotel         Amount (\$)       Payee Address;       City; State; Zip       food /snacks for meetings at hotel         Lorporate funds       calhoun, GA 30701       food /snacks for meetings at hotel       food /snacks for meetings at hotel         PuRPOSE       652 highway 53       calhoun, GA 30701       food /snacks for meetings at hotel         PuRPOSE       food/Beverage Expense       (b) Description       (See instructions regarding type of information meal on road to north ga democrats         Date       Payee name       food/Beverage Expense       (b) Description       (See instructions regarding type of information meal on road to north ga democrats         174.47       126 Holiday Blvd,       126 Holiday Blvd,       food /see instructors for examples of acceptable categories)       (b) Description       (See instructions regarding type of information hotel room         PuRPOSE       e)       Gal Category (See instructors for examples of acceptable categories)		,		
40.00       136 W Belmont D         expenditure from comports funds       calhoun, GA 30701         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information food /snacks for meetings at hote!         04/27/2023       Payee name       (A) 271/2023       (Krystals         Amount (\$)       Payee Address;       City; State; Zip       (See instructions regarding type of information food /snacks for meetings at hote!         19.92       652 highway 53       (b) Description       (See instructions regarding type of information meal on road to north ga democrats         PURPOSE expenditure from corporate funds       (a) Category (See instructors for examples of acceptable categories)       (b) Description       (See instructions regarding type of information meal on road to north ga democrats         Date       Payee name       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information meal on road to north ga democrats         Date       Payee Address;       City; State; Zip       (See instructions regarding type of information moder)         04/30/2023       Ia quinta       (See instructions regarding type of information por porter)       (See instructions regarding type of information hotel room         Date       Payee Address;       City; State; Zip       (See in				
Expenditure from corporate funds       calhoun, GA 30701         PURPOSE EXPENDITURE       (a) Category (see instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description       (see instructions regarding type of information food /snacks for meetings at hote!         Date 04/27/2023       Payee name krystals				
PURPOSE EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description       (See instructions regarding type of information food /snacks for meetings at hote!         Date       Payee name       krystals	nditure from	calhoun GA 30701		
expenditure from calhour, GA 30701     food /snacks for meetings at hotel       Purpose funds     Payee name (xrystals       Amount (\$)     Payee Address;     City; State; Zip       19.92     652 highway 53       19.92     652 highway 53       purpose funds     calhoun, GA 30701       Purpose funds     calhour, GA 30701       Purpose funds     (a) Category (See instructions for examples of acceptable categories)     (b) Description (See instructions regarding type of information meal on road to north ga democrats       Date 04/30/2023     Payee name			(b) Decoription	(See instructions regarding type of information requir
04/27/2023     krystals       Amount (\$)     Payee Address;     City; State; Zip       19.92     652 highway 53       Expenditure from controlate funds     calhoun, GA 30701       PURPOSE     (a) Category (See instructions for examples of acceptable categories)     (b) Description       (See instructions regarding type of information port of the payee name     (b) Description     (See instructions regarding type of information meal on road to north ga democrats       Date     Payee name     (A) Category (See instructions for examples of acceptable categories)     (b) Description       174.47     126 Holiday Blvd, 126 Holiday Blvd, 126 Holiday Blvd,     Siliddel, LA 70460       PURPOSE of EXPENDITURE     (a) Category (See instructions for examples of acceptable categories)     (b) Description       (See instructions regarding type of information for EXPENDITURE     sliddel, LA 70460       PURPOSE of EXPENDITURE     (a) Category (See instructions for examples of acceptable categories)     (b) Description       Otate     Payee name (A) Category (See instructions for examples of acceptable categories)     (b) Description       Of EXPENDITURE     (a) Category (See instructions for examples of acceptable categories)     (b) Description       Otate     Payee name (A) Category (See instructions for examples of acceptable categories)     (b) Description       Off     Payee name (A) Category (See instructions for examples of acceptable categories)     (b) Descript	OF			
Amount (\$)       Payee Address;       City;       State;       Zip         19.92       652 highway 53       Expenditure from calhoun, GA 30701         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information meal on road to north ga democrats         Date       Payee name       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information meal on road to north ga democrats         Date       Payee name       (a) Quinta         Amount (\$)       Payee Address;       City;       State;       Zip         174.47       126 Holiday Blvd,       Expenditure from corporate funds       Silddel, LA 70460         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information hotel room         Of       Silddel, LA 70460       Fravel Out of District       (b) Description hotel room       (See instructions regarding type of information hotel room         Od/24/2023       mcdonals       Amount (\$)       Payee name       (See instructions regarding type of information hotel room         04/24/2023       Payee name       (See instructions for examples of acceptable categories)       (b) Description hotel room         14.02 <t< td=""><td></td><td>Payee name</td><td></td><td></td></t<>		Payee name		
19.92     652 highway 53       Expenditure from corporate funds     calhoun, GA 30701       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories)     (b) Description (See instructions regarding type of information meal on road to north ga democrats       Date Of Fexpenditure from corporate funds     Payee name     (a) Category (See instructions for examples of acceptable categories)     (b) Description (See instructions regarding type of information meal on road to north ga democrats       Date Of Payee name     Payee Address;     City; State; Zip       174.47     126 Holiday Blvd,       Expenditure from corporate funds     sliddel, LA 70460       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories)     (b) Description (See instructions regarding type of information hotel room       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories)     (b) Description (See instructions regarding type of information hotel room       Date Of Expenditure from corporate funds     Payee name     (b) Description (See instructions regarding type of information hotel room       Date Of Expenditure from corporate funds     Payee name     (b) Description (See instructions regarding type of information hotel room       14.02     Payee Address; City; State; Zip     S16 MS-19       Expenditure from corporate funds     meridan , MS 39301	//2023	krystals		
13.92       intervent         Expenditure from corporate funds       calhoun, GA 30701         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description (See instructions regarding type of information meal on road to north ga democrats         Date 04/30/2023       Payee name la quinta       meal on road to north ga democrats         Amount (\$)       Payee Address; 174.47       City; State; Zip 126 Holiday Blvd, 126 Holiday Blvd, 126 Holiday Blvd, 126 Holiday Blvd, 127 avel Out of District       (b) Description (See instructions regarding type of information hotel room         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Name       (b) Description (See instructions regarding type of information hotel room         Date 04/24/2023       Payee name 04/24/2023       mcdonals         Amount (\$)       Payee name 04/24/2023       Travel Out of District         Date 04/24/2023       Payee name mcdonals       Side MS-19         14.02       S16 MS-19       S16 MS-19         14.02       meridan , MS 39301       Travel Out of S3301	nt (\$)	Payee Address; City; State; Zip		
Expenditure from corporate funds       calhoun, GA 30701         PURPOSE EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description (See instructions regarding type of information meal on road to north ga democrats         Date       Payee name	19.92	652 highway 53		
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description       (See instructions regarding type of information meal on road to north ga democrats         Date       Payee name       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information meal on road to north ga democrats         Date       Payee name       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information meal on road to north ga democrats         Lexpenditure from corporate funds       Payee Address;       City; State; Zip       (b) Description       (See instructions regarding type of information hotel room         Date OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description       (See instructions regarding type of information hotel room         Date 04/24/2023       Payee name mcdonals       Mount (\$)       Payee Address;       City; State; Zip         14.02       516 MS-19 meridan , MS 39301       meridan , MS 39301       (See instructions regarding type of information hotel room	nditure from			
OF EXPENDITURE     Food/Beverage Expense     meal on road to north ga democrats       Date     Payee name       04/30/2023     Ia quinta       Amount (\$)     Payee Address;     City; State; Zip       174.47     126 Holiday Blvd,       Expenditure from corporate funds     sliddel, LA 70460       PURPOSE SPOF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories) Travel Out of District     (b) Description hotel room     (See instructions regarding type of information hotel room       Date     Payee name       04/24/2023     mcdonals       Amount (\$)     Payee Address;     City; State; Zip       14.02     516 MS-19       Expenditure from corporate funds     meridan , MS 39301				
04/30/2023       la quinta         Amount (\$)       Payee Address; City; State; Zip         174.47       126 Holiday Blvd,         126 Holiday Blvd,       sliddel, LA 70460         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information hotel room         Date 04/24/2023       Payee name       mcdonals         04/24/2023       mcdonals       Figure Address; City; State; Zip         14.02       516 MS-19       516 MS-19         Expenditure from corporate funds       meridan , MS 39301	OF		•	
Amount (\$)       Payee Address;       City; State; Zip         174.47       126 Holiday Blvd,         Expenditure from corporate funds       sliddel, LA 70460         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description hotel room hotel room         Date       Payee name       (b) Payee name       (c) Category (See instructions for examples of acceptable categories)         04/24/2023       mcdonals       mcdonals       (c) See instructions regarding type of information hotel room         14.02       Fayee Address;       City; State; Zip       (c) State; Zip         14.02       Slid MS-19       (c) MS 39301       (c) MS 39301		Payee name		
174.47126 Holiday Blvd,Expenditure from corporate fundssliddel, LA 70460PURPOSE OF EXPENDITURE(a) Category (see instructions for examples of acceptable categories) Travel Out of District(b) Description hotel room(See instructions regarding type of information hotel roomDate 04/24/2023Payee name mcdonalsPayee name04/24/2023Payee Address; 516 MS-19City; State; Zip14.02Fayee Address; meridan , MS 39301City; State; Zip	)/2023	la quinta		
174.47       sliddel, LA 70460         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description hotel room       (See instructions regarding type of information hotel room         Date 04/24/2023       Payee name mcdonals       mcdonals         Amount (\$)       Payee Address; 14.02       City; State; Zip 516 MS-19         Expenditure from corporate funds       meridan , MS 39301	nt (\$)	Payee Address; City; State; Zip		
Expenditure from corporate funds       sliddel, LA 70460         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description hotel room       (See instructions regarding type of information hotel room         Date       Payee name       mcdonals       Image: Single Sin	174.47	126 Holiday Blvd,		
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description hotel room       (See instructions regarding type of information hotel room         Date       Payee name	nditure from	sliddel, LA 70460		
EXPENDITURE     Payee name       Date     Payee name       04/24/2023     mcdonals       Amount (\$)     Payee Address;     City; State; Zip       14.02     516 MS-19       Expenditure from corporate funds     meridan , MS 39301	IRPOSE (a	) Category (See instructions for examples of acceptable categories)	(b) Description	(See instructions regarding type of information requir
04/24/2023     mcdonals       Amount (\$)     Payee Address; City; State; Zip       14.02     516 MS-19       Expenditure from corporate funds     meridan , MS 39301		Travel Out of District	hotel room	
Amount (\$)     Payee Address;     City; State; Zip       14.02     516 MS-19       Expenditure from corporate funds     meridan , MS 39301		Payee name		
14.02516 MS-19Expenditure from corporate fundsmeridan , MS 39301	1/2023	mcdonals		
Expenditure from corporate funds meridan , MS 39301	nt (\$)	Payee Address; City; State; Zip		
Expenditure from corporate funds meridan , MS 39301	14.02	516 MS-19		
	nditure from	maridan MC 20221		
			<i>a</i> >	
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information breakfast meridan mississippi	OF		•	(See instructions regarding type of information requirer information req

SCHEDULE I

	The Instruction Guide explains how to	) complete this form.
Total pages Schedule I: Sch: 13/20 Rpt:	2 FILER NAME New Blue USA PAC	3 Filer ID (Ethics Commission Filers) 00086828
Date 04/05/2023	5 Payee name national pens	
Amount (\$) 216.49	<ul><li>7 Payee Address; City; State; Zip</li><li>342 Shelbyville Mills Roa</li></ul>	
Expenditure from corporate funds	Shelbyville, TN 37160	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Solicitation/Fundraising Expense	(b) Description (See instructions regarding type of information required.) new blue usa promo whistles - mtg defense tool
Date 04/29/2023	Payee name olive garden 002163	<u></u>
Amount (\$) 57.92	Payee Address; City; State; Zip 168 Northshore Blvd	
Expenditure from corporate funds	sliddel, LA 70460	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) meal
Date	Payee name	<u>.</u>
04/24/2023	pilot	
Amount (\$) 30.00	Payee Address; City; State; Zip 2111 SW Railroad Avenue	
Expenditure from corporate funds	hammond, LA 70403	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) gasoline as we drove across USA to promote NewBlueUSA
Date 04/29/2023	Payee name pilot 0274	<u></u>
Amount (\$) 40.00	Payee Address;City; State; Zip2112 Rees St,	
Expenditure from	breaux bridge, LA 70517	
corporate funds PURPOSE	(a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) gasoline

Tat-L-		The instruction G	uide explains how to	complete this	s iorm.	
Total pages Sch: 14/20		PRILER NAME New Blue USA PAC			3 Filer ID 00086828	(Ethics Commission Filers)
Date	5	Payee name			1	
04/24/2023	3	pilot flying j				
Amount (\$)	7	' Payee Address;	City; State; Zip			
3	32.04	2111 US Highway 41	NE			
Expenditure corporate fu		calhoun, TX 30701				
PURPOS OF EXPENDITU	-	a) Category (See instructions for Travel Out of District	r examples of acceptable categories)	<b>(b)</b> Description gasoline fill ι		ting type of information required.)
Date		Payee name				
04/01/2023	3	pnc bank				
Amount (\$)		Payee Address;	City; State; Zip			
	22.00	p.o. box 609				
Expenditure		pittsuburg, PA 15230	9738			
PURPOS			r examples of acceptable categories)	(b) Description	(See instructions regard	ling type of information required.)
OF EXPENDITU	JRE	Fees		bank fees for	r April 2022	
Date		Payee name				
03/01/2023	3	pnc bank				
Amount (\$)		Payee Address;	City; State; Zip			
2	22.00	p.o. box 609				
Expenditure		pittsuburg, PA 15230	9738			
			r examples of acceptable categories)	(b) Description	(See instructions regard	ding type of information required.)
PURPOS		Fees		bank fees		
PURPOS OF EXPENDITU	URE					
OF	JRE	Payee name				
OF		Payee name pnc bank				
OF EXPENDITU Date		pnc bank Payee Address;	City; State; Zip			
OF EXPENDITI Date 05/01/2023 Amount (\$)		pnc bank	City; State; Zip			
OF EXPENDITI Date 05/01/2023 Amount (\$)	22.00 from	pnc bank Payee Address;				
OF EXPENDITU Date 05/01/2023 Amount (\$) Expenditure	22.00 from nds	pnc bank Payee Address; p.o. box 609 pittsuburg, PA 15230		(b) Description bank fees	(See instructions regard	ling type of information required.)

Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 15/20 Rpt:	New Blue USA PAC	00086828
Date	5 Payee name	
06/01/2023	pnc bank	
Amount (\$)	7 Payee Address; City; State; Zip	
22.00	p.o. box 609	
Expenditure from corporate funds	pittsuburg, PA 15230-9738	
PURPOSE		(b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Fees	bank fees
Date	Payee name	
02/27/2023	popeyes	
Amount (\$)	Payee Address; City; State; Zip	
	6105 ringold road	
11.66 – Expenditure from		
corporate funds	Chattanooga, TX 37412	
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	•
OF EXPENDITURE	Food/Beverage Expense	dinner in Chattanooga
Date	Payee name	
04/25/2023	race trac	
Amount (\$)	Payee Address; City; State; Zip	
10.00	1511 W Walnut Ave	
Expenditure from		
corporate funds	dalton, GA 30720	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)	•
EXPENDITURE	Travel Out of District	gasoline
	Payee name	
Date		
Date 04/24/2023	ruby tuesday	
	ruby tuesday Payee Address; City; State; Zip	
04/24/2023 Amount (\$)		
04/24/2023	Payee Address; City; State; Zip 731 Hwy 53	
04/24/2023 Amount (\$) 43.63	Payee Address; City; State; Zip 731 Hwy 53 calhoun, TX 30701	
04/24/2023 Amount (\$) 43.63 Expenditure from corporate funds PURPOSE	Payee Address; City; State; Zip 731 Hwy 53 calhoun, TX 30701 (a) Category (See instructions for examples of acceptable categories)	•
04/24/2023 Amount (\$) 43.63 Expenditure from corporate funds	Payee Address; City; State; Zip 731 Hwy 53 calhoun, TX 30701	(b) Description (See instructions regarding type of information required.) meal while in Calhoun, ga

OF EXPENDITURE       Food/Beverage Expense       If body permission is a second permissing permission is a second permissing permissio	3 Filer ID (Ethics Commission Filers) 00086828	ule I: 2 FILER NAME New Blue USA PAC	Total pages Schedule I: Sch: 16/20 Rpt:
9.24     731 Hwy 53       Expenditure from Corporate funds     calhoun, GA 30701       PURPOSE EXPENDITURE     (a) Category (See instructions for examples of acceptable categories)     (b) Description     (See instructions regarding type of inf meal with ligbq community leaders       Date 04/24/2023     Payee name 349.44     Payee Address;     City; State; Zip 943 Highway 53 Spur S       Expenditure from corporate funds     calhoun, GA 30701       PURPOSE EXPENDITURE     (a) Category (See instructions for examples of acceptable categories)     (b) Description (See instructions regarding type of inf gasoline       Date 04/24/2023     calhoun, GA 30701     (See instructions regarding type of inf gasoline       Date 04/24/2023     category (See instructions for examples of acceptable categories)     (b) Description (See instructions regarding type of inf gasoline       Date 04/24/2023     Payee name shop rite			
corporate funds       calhoun, GA 30701         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of inf meal with Igbq community leaders         Date       Payee name       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of inf meal with Igbq community leaders         Date       Payee name       (b) Description (See instructions regarding type of inf meal with Igbq community leaders         49.44       943 Highway 53 Spur S       (See instructions regarding type of inf ocnporate funds         calhoun, GA 30701       943 Highway 53 Spur S         PurpoSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)         Of       Travel Out of District       (b) Description (See instructions regarding type of inf gasoline         Date       Payee name       (b) Description (See instructions regarding type of inf gasoline         04/24/2023       shop rite       (D) Description (See instructions regarding type of inf display of inf gasoline         1       Expenditure from       Crowley, LA 70526         PurPoSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of inf drinks as we drove across USA to prof NewBlueUSA         Date       Payee name       (A)/30/202			9.24
OF EXPENDITURE     Food/Beverage Expense     meal with lgbq community leaders       Date 04/24/2023     Payee name 3-bill     Payee name 3-bill       Amount (\$)     Payee Address; 49.44     City; State; Zip 943 Highway 53 Spur S       Expenditure from calhoun, GA 30701     (b) Description gasoline       PURPOSE 0F EXPENDITURE     Payee name 04/24/2023       Date 04/24/2023     Payee name shop rite       Amount (\$)     Payee name 525 S Parkerson 1corporate funds       Crowley, LA 70526       PURPOSE 0F EXPENDITURE       Q       Actegory (See instructions regarding type of inf gasoline       Crowley, LA 70526       PURPOSE 0F EXPENDITURE       Q       Actegory (See instructions regarding type of inf pool/Beverage Expense       Crowley, LA 70526       PURPOSE 0F EXPENDITURE       Q       Amount (\$)       Payee name 04/30/2023       Amount (\$)       Payee name 04/30/2023       Sonic       Amount (\$)       Payee Address; City; State; Zip 6.93       Total Component funds       City; State; Zip 753 W Pine St		calhoun, GA 30701	
04/24/2023       shell         Amount (\$)       Payee Address; City; State; Zip         49.44       943 Highway 53 Spur S         Expenditure from Corporate funds       calhoun, GA 30701         PURPOSE OF EXPENDITURE       (a) Category (see instructions for examples of acceptable categories) Travel Out of District       (b) Description         Date 04/24/2023       Payee name shop rite       (b) Description       (See instructions regarding type of inf gasoline         Amount (\$)       Payee name 04/24/2023       Shop rite       (b) Description       (See instructions regarding type of inf gasoline         Amount (\$)       Payee Address; City; State; Zip 4.06       City; State; Zip       (b) Description       (See instructions regarding type of inf drinks as we drove across USA to prov NewBlueUSA         PuRPOSE oF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description       (See instructions regarding type of inf drinks as we drove across USA to prov NewBlueUSA         Date 04/30/2023       Payee name 3onic       Sonic       Payee Address; City; State; Zip 753 W Pine St       Food/Beverage Expense         1       Expenditure from 6.93       Payee Address; City; State; Zip       To the tot t EDET			OF
Amount (\$)       Payee Address;       City; State; Zip         49,44       943 Highway 53 Spur S         Expenditure from corporate funds       calhoun, GA 30701         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description       (See instructions regarding type of inf gasoline         Date 04/24/2023       Payee name       (A) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of inf gasoline         Amount (\$)       Payee Address;       City; State; Zip       (b) Description       (See instructions regarding type of inf gasoline         Amount (\$)       Payee Address;       City; State; Zip       (b) Description       (See instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA         Date       Payee name       (A) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA         Date       Payee name       (A) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA         Date       Payee name       (A) Category (See instructions; City; State; Zip       (S)	<u> </u>	-	Date
49.44     943 Highway 53 Spur S       Expenditure from corporate funds     calhoun, GA 30701       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories) OF EXPENDITURE     (b) Description gasoline     (See instructions regarding type of inf gasoline       Date 04/24/2023     Payee name 3hop rite     (See instructions regarding type of inf gasoline       Amount (\$)     Payee Address; 525 S Parkerson     City; State; Zip 525 S Parkerson       Expenditure from corporate funds     Crowley, LA 70526       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense     (b) Description (See instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA       Date 04/30/2023     Payee name 3onic     Sonic       Amount (\$)     Payee name 3onic     Vity; State; Zip 753 W Pine St       Expenditure from 6.93     Expenditure from		shell	04/24/2023
J corporate funds       calhoun, GA 30701         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description gasoline       (See instructions regarding type of inf gasoline         Date       Payee name			49.44
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description gasoline       (See instructions regarding type of inf gasoline         Date 04/24/2023       Payee name shop rite       Payee dddress; 255 S Parkerson       City; State; Zip 525 S Parkerson       Convely, LA 70526         PurPoSE orporate funds       (a) Category (See instructions for examples of acceptable categories) foof Expenditure from       (b) Description (See instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA         Date 04/30/2023       Payee name sonic       Payee name foof       (b) Description (See instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA         Date 04/30/2023       Payee name sonic       Food /Beverage Expense       (b) Description for trace instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA         Date 04/30/2023       Payee name sonic       Food /Beverage City; State; Zip 753 W Pine St         Expenditure from       Payee Address; City; State; Zip         6.93       Food Wine St		calhoun, GA 30701	
04/24/2023       shop rite         Amount (\$)       Payee Address;       City; State; Zip         4.06       525 S Parkerson         Expenditure from       Crowley, LA 70526         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA         Date       Payee name			PURPOSE OF
Amount (\$)       Payee Address;       City; State; Zip         4.06       525 S Parkerson         Expenditure from       Crowley, LA 70526         PURPOSE       (a) Category (See instructions for examples of acceptable categories)         OF       Food/Beverage Expense         Date       Payee name         04/30/2023       sonic         Amount (\$)       Payee Address;       City; State; Zip         6.93       753 W Pine St		Payee name	Date
4.06       525 S Parkerson         Expenditure from corporate funds       Crowley, LA 70526         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense       (b) Description (See instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA         Date       Payee name         04/30/2023       Sonic         Amount (\$)       Payee Address; City; State; Zip         6.93       753 W Pine St		shop rite	04/24/2023
Expenditure from corporate funds       Crowley, LA 70526         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of inf drinks as we drove across USA to pror NewBlueUSA         Date       Payee name       sonic         04/30/2023       Sonic			
OF EXPENDITURE       Food/Beverage Expense       drinks as we drove across USA to pror NewBlueUSA         Date       Payee name         04/30/2023       sonic         Amount (\$)       Payee Address;         6.93       753 W Pine St		Crowley, LA 70526	Expenditure from
04/30/2023     sonic       Amount (\$)     Payee Address;     City; State; Zip       6.93     753 W Pine St	drinks as we drove across USA to promote	., .,	OF
Amount (\$) Payee Address; City; State; Zip 6.93 753 W Pine St	<u></u>	Payee name	Date
6.93 753 W Pine St		sonic	04/30/2023
			6.93
		ponchatoula, LA 70454	
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of inf meal			OF

Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers
Sch: 17/20 Rpt:	New Blue USA PAC	00086828
Date 04/28/2023	5 Payee name super 8 motel	
Amount (\$)	7 Payee Address; City; State; Zip	
120.00	115 hampton drive se	
Expenditure from corporate funds	calhoun, GA 70201	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required. fees for super 8 motel
Date	Payee name	
03/24/2023	tailwinds	
Amount (\$)	Payee Address; City; State; Zip	
11.78	001 Airport Road, STE 14	
Expenditure from		
corporate funds	chattanooga, TN 37421	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. food chattanooga airport
Date	Payee name	
04/25/2023	taziki mediterrian cafe	
Amount (\$)	Payee Address; City; State; Zip	
31.82	432 Market St	
Expenditure from corporate funds	Chattanooga, TN 37402	
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	•
OF EXPENDITURE	Food/Beverage Expense	meeting with Kelly Sprout political activist in Chattanooga area
Date	Payee name	
04/25/2023	taziki mediterrian cafe	
Amount (\$)	Payee Address; City; State; Zip	
10.80	432 Market St	
Expenditure from	abottopoogo TN 27402	
corporate funds	chattanooga, TN 37402	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required. meeting with Kelly Sprout Political activist
	1	I

OF       Food/Beverage Expense       Immediation of the provided of the provi	Total pages Schedule I: Sch: 18/20 Rpt:	2 FILER NAME New Blue USA PAC	3 Filer ID (Ethics Commission Filers 00086828
140.06       1110 Market St         Incorporate funds       chattanooga, TN 37402         PURPOSE       (a) Category (see instructions for examples of acceptable categories)       (b) Description       (see instructions regarding type of information required meal with New Blue representation Judy, Tn state representative Hakim , Hamilton Party chariman         Date       Payee name       0.9.05         0.9.05       Payee Address:       City: State; Zip         Amount (8)       Payee Address:       City: State; Zip         Amount (8)       Payee Address:       City: State; Zip         0.3/20/2023       uber       (a) Category (see instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required from airport to hotel in Chattanooga         Date       Oage name       03/20/2023       uber         Anount (8)       Payee Address:       City: State; Zip         Anount (8)       Payee Address:       City: State; Zip         12.00       hampilton place drive       (b) Description       (See instructions reparding type of information required uber driver around chattanooga for meetings         City: State; Zip       Travel Out of District       (b) Description       (See instructions reparding type of information required uber driver around chattanooga for meetings         Date       Payee Address;			
corporate funds       chattanooga, TN 37402         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required meal with New Blue representation Judy, Tn state representative Hakim , Hamilton Party chariman         Date 03/22/2023       uber         Amount (\$)       Payee Address; chattanooga, TN 37421         PURPOSE 0F EXPENDITURE       (a) Category (See instructions required meal with New Blue representation Judy, Tn state representative Hakim , Hamilton Party chariman         Date 03/22/2023       uber         Amount (\$)       Payee Address; Travel Out of District         PURPOSE 0F EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description         Date 03/20/2023       Payee name uber       (b) Description       (See instructions regarding type of information required from airport to hotel in Chattanooga         Date 03/20/2023       Payee name uber       (b) Description       (See instructions regarding type of information required from airport actual chattanooga for meetings         Date 03/20/2023       Payee name uber       (b) Description       (See instructions regarding type of information required from airport actual chattanooga for meetings         Date 03/20/2023       Payee name uber       (b) Description       (See instructions regarding type of information required fravel Out of Distr	140.06		
OF       Food/Beverage Expense       meal with New Blue representation Judy. Th state representative Hakim . Hamilton Party chariman         Date       Payee name       uber         Amount (\$)       Payee Address; City; State; Zip       (b) Description (See instructions regarding type of information required from airport to hotel in Chattanooga         Off       (a) Category (See instructions for examples of acceptable categories)       (b) Description (See instructions regarding type of information required from airport to hotel in Chattanooga         Date       Payee Address; City; State; Zip       (b) Description (See instructions required from airport to hotel in Chattanooga         Date       Payee name       (b) Description (See instructions required from airport to hotel in Chattanooga         O3/20/2023       uber       (b) Description (See instructions required from airport to hotel in Chattanooga         Expenditure from corporate funds       chattanooga, TN 37421       (b) Description (See instructions required uber driver around chattanooga for meetings         Date       Payee name       (b) Description (See instructions required uber driver around chattanooga for meetings         Date       O3/20/2023       uber       (b) Description (See instructions required uber driver around chattanooga for meetings         Date       O3/200203       uber       (b) Description (See instructions required uber driver around chattanooga for meetings         S.00       Fayee name <td></td> <td>chattanooga, TN 37402</td> <td></td>		chattanooga, TN 37402	
03/22/2023     uber       Amount (\$)     Payee Address;     City; State; Zip       9.95     hamilton place blvd       2.95     chattanooga, TN 37421       PURPOSE     (a) Category (See instructions for examples of acceptable categories)     (b) Description       PURPOSE     Fravel Out of District     (b) Description       Date     Payee name       03/20/2023     Payee Address;     City; State; Zip       hampilton place drive     chattanooga, TN 37421       Corporate funds     chattanooga, TN 37421       PURPOSE     Payee name     (b) Description       12.00     hampilton place drive       corporate funds     chattanooga, TN 37421       PURPOSE     (a) Category (See instructors for examples of acceptable categories)       Travel Out of District     (b) Description       Date     Payee name       03/20/2023     uber       Amount (\$)     Payee name       off     Travel Out of District       Date     Payee name       03/20/2023     uber       Amount (\$)	OF		meal with New Blue representation Judy, Tn state
Amount (\$)       Payee Address;       City;       State;       Zip         9.95       hamilton place blvd       chattanooga, TN 37421       (a) Category (See instructions regarding type of Information required from airport to hotel in Chattanooga         PURPOSE       Payee name       (b) Description       (See instructions regarding type of Information required from airport to hotel in Chattanooga         Date       Payee name       (b) Description       (See instructions regarding type of Information required from airport to hotel in Chattanooga         Mount (\$)       Payee name       (b) Description       (See instructions regarding type of Information required from airport to hotel in Chattanooga         Date       Payee name       (b) Description       (See instructions regarding type of Information required from airport to hotel in Chattanooga, TN 37421         PURPOSE       Ch       Chattanooga, TN 37421       (b) Description       (See instructions regarding type of Information required uber driver around chattanooga for meetings         Date       Payee name       (b) Description       (See instructions regarding type of Information required uber driver around chattanooga for meetings         Date       Payee name       (b) Description       (See instructions regarding type of Information required uber driver around chattanooga for meetings         5.00       Fayee Address;       City; State; Zip       (b) Description       (See instructions regardin			1
9.95     hamilton place blvd       Expenditure from corporate funds     chattanooga, TN 37421       PURPOSE of EXPENDITURE     (a) Category (See instructions for examples of acceptable categories) Travel Out of District     (b) Description (See instructions regarding type of information required from airport to hotel in Chattanooga       Date     Payee name       03/20/2023     uber       Amount (\$)     Payee Address; City; State; Zip hampilton place drive       12.00     chattanooga, TN 37421       PURPOSE of EXPENDITURE     (a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required uber driver around chattanooga for meetings       Date     Payee name       03/20/2023     (a) Category (See instructions for examples of acceptable categories)       Date     Payee name       03/20/2023     uber       Date     Payee name       03/20/2023     uber       Amount (\$)     Payee name       5.00     hamilton place drive       5.00     chattanooga, TN 37421       PURPOSE     (a) Category (See instructions for examples of acceptable categories)       05     City; State; Zip hamilton place drive       5.00     chattanooga, TN 37421       PURPOSE     (a) Category (See instructions for examples of acceptable categories)       04     Description (See instructions regardin			
corporate funds       chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required from airport to hotel in Chattanooga         Date       Payee Address;       City; State; Zip       (b) Description       (See instructions regarding type of information required from airport to hotel in Chattanooga         Mount (\$)       Payee Address;       City; State; Zip       (b) Description       (See instructions regarding type of information required from airport to hotel in Chattanooga         Expenditure from Corporate funds       chattanooga, TN 37421       (b) Description       (See instructions regarding type of information required uber driver around chattanooga for meetings         Date OF EXPENDITURE       Payee name 03/20/2023       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description       (See instructions regarding type of information required uber driver around chattanooga for meetings         Date 03/20/2023       Payee name uber       -       -       -       -         Amount (\$)       Payee Address;       City; State; Zip hamilton place drive       -       -         5.00       Expenditure from corporate funds       -       -       -       -         Expenditure from corporate funds       -       -       -       <	9.95		
OF EXPENDITURE     Travel Out of District     from airport to hotel in Chattanooga       Date     Payee name       03/20/2023     uber       Amount (\$)     Payee Address; City; State; Zip       hampilton place drive	1 1	chattanooga, TN 37421	
03/20/2023       uber         Amount (\$)       Payee Address; City; State; Zip         12.00       hampilton place drive         12.00       chattanooga, TN 37421         PURPOSE oF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description (See instructions regarding type of information required uber driver around chattanooga for meetings         Date 03/20/2023       Payee name uber       uber         Amount (\$)       Payee Address; City; State; Zip hamilton place drive         5.00       Payee Address; City; State; Zip hamilton place drive         Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE of Expenditure from corporate funds       (a) Category (See instructions for examples of acceptable categories) Travel Out of District         PURPOSE of Expenditure from create funds       (a) Category (See instructions for examples of acceptable categories) Travel Out of District	OF		
Amount (\$)       Payee Address;       City;       State;       Zip         12.00       hampilton place drive       hampilton place drive       hampilton place drive         corporate funds       chattanooga, TN 37421       (b) Description (See instructions regarding type of information required uber driver around chattanooga for meetings         PURPOSE OF EXPENDITURE       Payee name       (b) Description (See instructions regarding type of information required uber driver around chattanooga for meetings         Date 03/20/2023       Payee name       uber         Amount (\$)       Payee Address;       City;         5.00       Payee Address;       City;         Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories)         Travel Out of District       (b) Description (See instructions regarding type of information required uber drive around chattanooga for meetings         Date Of Expenditure from Corporate funds       chattanooga, TN 37421         PURPOSE OF Expenditure from Corporate funds       (a) Category (See instructions for examples of acceptable categories)         Travel Out of District       (b) Description (See instructions regarding type of information required uber fees for travel around Chattanooga for	Date	Payee name	
12.00       hampilton place drive         Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description (See instructions regarding type of information required uber driver around chattanooga for meetings         Date 03/20/2023       Payee name uber       uber         Amount (\$)       Payee Address; City; State; Zip hamilton place drive       City; State; Zip hamilton place drive         Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description (See instructions regarding type of information required uber fees for travel around Chattanooga for	03/20/2023	uber	
L2.00       Chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description (See instructions regarding type of information required uber driver around chattanooga for meetings         Date 03/20/2023       Payee name uber       uber         Amount (\$)       Payee Address; City; State; Zip hamilton place drive       City; State; Zip hamilton place drive         Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description (See instructions regarding type of information required uber fees for travel around Chattanooga for	Amount (\$)		
corporate funds       chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description (See instructions regarding type of information required uber driver around chattanooga for meetings         Date 03/20/2023       Payee name uber       uber         Amount (\$)       Payee Address; City; State; Zip hamilton place drive       City; State; Zip chattanooga, TN 37421         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description (See instructions regarding type of information required uber fees for travel around Chattanooga for	12.00	hampilton place drive	
PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description       (See instructions regarding type of information required uber driver around chattanooga for meetings         Date       Payee name       uber         03/20/2023       uber         Amount (\$)       Payee Address; 5.00       City; State; Zip         Expenditure from corporate funds       chattanooga, TN 37421.         PURPOSE OF EXPENDITURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description       (See instructions regarding type of information required uber driver around chattanooga for		chattanooga, TN 37421	
EXPENDITURE       Indicidition bisinitia       Indicidition bisinitia         Date       Payee name         03/20/2023       uber         Amount (\$)       Payee Address; City; State; Zip         5.00       hamilton place drive         Expenditure from       chattanooga, TN 37421         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required uber fees for travel around Chattanooga for	- ·	-	s) (b) Description (See instructions regarding type of information required.
03/20/2023       uber         Amount (\$)       Payee Address; City; State; Zip hamilton place drive         5.00       hamilton place drive         Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE OF FUNDTURE       (a) Category (See instructions for examples of acceptable categories) Travel Out of District       (b) Description (See instructions regarding type of information required uber fees for travel around Chattanooga for		Travel Out of District	uber driver around chattanooga for meetings
Amount (\$)       Payee Address;       City; State; Zip         5.00       hamilton place drive         5.00       chattanooga, TN 37421         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required uber fees for travel around Chattanooga for	Date	Payee name	
5.00     hamilton place drive       Expenditure from corporate funds     chattanooga, TN 37421       PURPOSE OF EXPENDITURE     (a) Category (See instructions for examples of acceptable categories) Travel Out of District     (b) Description uber fees for travel around Chattanooga for	03/20/2023	uber	
Expenditure from corporate funds       chattanooga, TN 37421         PURPOSE OF COF COF COF COF COF COF COF COF COF	Amount (\$)	Payee Address; City; State; Zip	
Corporate funds       chattanooga, TN 37421         PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required uber fees for travel around Chattanooga for	5.00	hamilton place drive	
PURPOSE       (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required uber fees for travel around Chattanooga for         OF       Travel Out of District       uber fees for travel around Chattanooga for		chattanooga TN 37421	
OF Travel Out of District uber fees for travel around Chattanooga for	•	-	s) (b) Description (See instructions regarding type of information required.
	OF		uber fees for travel around Chattanooga for

SCHEDULE I

Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 19/20 Rpt:	New Blue USA PAC	00086828
Date 03/20/2023	5 Payee name uber	
Amount (\$) 9.99 Expenditure from	7 Payee Address; City; State; Zip hamilton place blvd	
corporate funds PURPOSE OF EXPENDITURE	chattanooga, TN 37421 (a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) travel around tennessee for eventa
Date 03/20/2023	Payee name uber	
Amount (\$) 8.00 Expenditure from	Payee Address; City; State; Zip hamilton place blvd	
corporate funds PURPOSE OF EXPENDITURE	chattanooga, TN 37421 (a) Category (See instructions for examples of acceptable categories) Travel Out of District	(b) Description (See instructions regarding type of information required.) travel around Chattanooga
Date	Payee name	
02/23/2023	verizon wireless	
Amount (\$) 686.40	Payee Address; City; State; Zip 1095 avenue of the americas	
Expenditure from corporate funds	New York, NY 10036	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) ( Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) ipad to be used for new blue usa
Date 03/14/2023	Payee name verizon wireless	
Amount (\$) 250.00	Payee Address; City; State; Zip 2109 hwy 6	
Expenditure from	sugar land, TX 77498	
corporate funds	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.) additional payment on ipad/service fees

The Instruction Guide explains how to complete this form. 2 FILER NAME Filer ID (Ethics Commission Filers) 1 Total pages Schedule I: 3 Sch: 20/20 Rpt: New Blue USA PAC 00086828 4 Date Payee name 5 04/27/2023 walmart Amount (\$) Payee Address; City; State; Zip 6 7 parkside 44.09 Expenditure from knoxville, TN 37919 corporate funds (a) Category (See instructions for examples of acceptable categories) 8 PURPOSE (b) Description (See instructions regarding type of information required.) OF EXPENDITURE hygeine stuff like tooth paste, deodorant, incidentals that needed replacing used during trip etc