



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 7-28-24 2.a. Candidate or Committee Name: Sable Otey
- 2.b. If Committee, Name of Candidate: Sable Otey and Friends 3. Election Date: 8.1.24
4. Campaign Address: 65 Germantown Ct Suite 200
City: Cordova State: TN Zip Code: 38018 Phone: 901.337.3966
5. Candidate Home Address: _____
City: Cordova State: TN Zip Code: 38016 Phone: 901.337.3966
Candidate Email Address: Sable otey and friends@gmail.com
6. Office Sought: (include district number, if applicable) Shelby County School Board District 5
7. Name of Political Treasurer (may be candidate): Williams D. Brack
Political Treasurer Email Address: Williams.brack@buildbankable.com
8. Category or Report: (check one)
 First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 Mid-Year Supplemental Year-End Supplemental Runoff Election
9. Reporting Period: Start Date: 7-1-24 End Date: 7-22-24
10. Detailed Disclosure: (Check one)
 This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
 This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.
11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.

Sable Otey 7.28.24 Williams D. Brack 7.28.24
Candidate Signature Date Political Treasurer Signature Date
Shelby Brack 7.29.24 Shelby Brack 7/29/24
Witness Signature Date Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$	<u>4,423</u>
b. Total Receipts This Period	\$	<u>19,925</u>
c. Total Disbursements This Period	\$	<u>6,229</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>6,932</u>
e. Total Loans Outstanding	\$	<u>0</u>
f. Total Obligations Outstanding	\$	<u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Sable Oley

14. Reporting Period: Start Date: 1-1-24 End Date: 7-22-24

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 875
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ ~~875~~ 19,050
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period..... \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 19,925

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 6,229
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period..... \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 6,229

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 323.45
- c. Total In-Kind Contributions Received This Period \$ 323.45

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0

Candidate or Committee Name	Reporting Period Start Date	Reporting Period End Date	Total Campaign Contributions from preceding page									
Business or Organization	First Name	Last Name	Address	City	State	Zip Code	Occupation	Employer	Election	Amount	Date	Aggregate
The Cigna Group Employee PAC	Johnny Vincent	Brown	1601 Chestnut St. TL168 150 Huddleston Road	Philadelphia	PA	19129	PAC	PAC	General	\$2,000.00	7/19/2024	\$2,000.00
	Chantale	Dixie Hilliard	4020 Drakes Branch Rd	Nashville	TN	30269	Management	Arrowhead Clinics	General	\$1,800.00	7/15/2024	\$1,800.00
	William	Lowe	5291 Jeffrey Keith Drive	Arlington	TN	37218	Transportation	Elite Trucking	General	\$1,800.00	7/19/2024	\$1,800.00
	TERIKA	SNIED	2510 Wallons ave.	Memphis	TN	38002	Human Resources	Chamblee Hilliard	General	\$1,800.00	7/14/2024	\$1,800.00
	Hosia	Jones	603 Koehn Way	Nashville	TN	38127	retired	retired	General	\$1,800.00	7/19/2024	\$1,800.00
			1808 Cahal Ave.	Nashville	TN	37206	retired	TN/CAFE	General	\$1,800.00	7/16/2024	\$1,800.00
			25 Louisiana Avenue NW	Washington	DC	20001	retired	retired	General	\$1,300.00	7/19/2024	\$1,300.00
			60 N BB King BLVD	Memphis	TN	38103	PAC	PAC	General	\$1,000.00	7/10/2024	\$1,000.00
			1180 Highway 193	Celentville	TN	38017		Oack	General	\$1,000.00	7/19/2024	\$1,000.00
	Ray	Vaughn	3318 Flower Valley Avenue	Memphis	TN	38128	Truck Driver	JNL Express	General	\$850.00	7/17/2024	\$850.00
	Derrick	Granderson	3980 Lakewood Cove	Memphis	TN	38128	General Contractor	Coleman Contractors & Design	General	\$500.00	7/17/2024	\$500.00
	Alicia	Halliburton	301 E LYNCH ST	COTTON PLAZA	TN	72038	retired	retired	General	\$500.00	7/19/2024	\$500.00
	Connell	Woods	9409 Forest Station CV	Collierville	TN	38017	Business	Business	General	\$500.00	7/19/2024	\$500.00
	Winston	Gujson	3844 Planters View Dr	Memphis	TN	38133	Scale Rep	TN General Assembly	General	\$500.00	7/19/2024	\$500.00
			8308 Stimpje Oaks Dr	Cordova	TN	38018			General	\$250.00	7/19/2024	\$250.00
			5420 Gold Leaf Ln	Memphis	TN	38125	Director	City of Memphis	General	\$200.00	7/19/2024	\$200.00
			1215 Poplar Ave	Memphis	TN	38104	Doctor	Northcross Internal Medicine	General	\$150.00	7/19/2024	\$150.00
										\$19,050.00		\$19,050.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Sable O'Leary
2. Reporting Period: Start Date: 7-1-24 End Date: 7-22-24
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: Advanced Injury Care Clinic OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2700 Gallatin Pike City: Nashville State: TN Zip Code: 37216
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 323 In-Kind Contribution Date: 7.21.24 Aggregate This Election: \$ 323
Description of In-Kind Contribution: Printing

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 323

(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)

Business or Organization Name	First Name	Last Name	Address	City	State	Zip Code	Purpose	Amount	Date
Diamond Printing	Artielle	Gipson	611 N 3rd St	Memphis	TN	38017	Campaign manager pay	\$1,000.00	7/1/24
Cooper S Printing							Marketing	\$584.45	7/2/24
Paypal							Sign print/ Marketing	\$321.00	7/3/24
Walmart							Canvasser Pay	\$45.00	7/3/24
Teamsters			577 N Germantown Pkwy	Cordova	TN	38018	Tents, tent weights, chairs	\$1,137.24	7/5/24
							Promotional ad	\$250.00	7/8/24
4imPrint	Ronald	McCorcle	787 N herrinton	Cordova	TN	38018	sign placement	\$132.00	7/12/24
Instacart	Artielle	Gipson					Shirts for campaign	\$304.07	7/15/24
Chick-fil-A							Portable Fans for poll woi	\$8.29	7/16/24
Handz4yshua							Reimbursement	\$270.00	7/17/24
Little Caesars							Lunch for poll workers	\$82.06	7/17/24
Panera Bread							Poll worker payment	\$600.00	7/18/24
Subway							Lunch for poll worker	\$43.11	7/18/24
Marcos's Pizza							Lunch for poll workers	\$20.93	7/18/24
Uber							Lunch for poll worker	\$16.61	7/19/24
Kroger							Volunteer meeting	\$107.90	7/19/24
Zaxby's	Faye	Boyce					Cancelled uber ride for po	\$5.35	7/19/24
	Erin	Oley					Snacks- poll worker food	\$76.46	7/19/24
	Keatrice	McRoy					Lunch for poll worker	\$23.81	7/22/24
Apple Pay							Poll work	\$800.00	7/22/24
Facebook Ad							Gas	\$63.50	7/22/24
							Poll work and Lunch	\$291.85	7/22/24
Total							Facebook ad	\$46.15	7/26/24
								\$6,229.78	

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ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Sage Oley
2. Reporting Period: Start Date: 7-1-24 End Date: 7-22-24
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Outstanding Loan Balance (Beginning) \$ _____
Loans Received \$ _____
Loan Payments \$ _____
Outstanding Loan (End)..... \$ _____
Loan Received For: Primary Election General Election Runoff (Local Elections Only)
Date of Loan: _____

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ 0
Loans Received \$ 0
Loan Payments \$ 0
Outstanding Loan (End)..... \$ 0

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Sable Ofey

2. Reporting Period: Start Date: 7-1-24 End Date: 7-22-24

3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____ First Name: _____ Middle Name: _____ Last Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
Description of Obligation:													
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)										
\$	\$	\$	\$										

Business Name: _____ First Name: _____ Middle Name: _____ Last Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
Description of Obligation:													
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)										
\$	\$	\$	\$										

Business Name: _____ First Name: _____ Middle Name: _____ Last Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
Description of Obligation:													
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)										
\$	\$	\$	\$										

Business Name: _____ First Name: _____ Middle Name: _____ Last Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
Description of Obligation:													
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)										
\$	\$	\$	\$										

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 0	\$ 0	\$ 0	\$ 0