

JAN 26 2023

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**For State and Local Candidates
For Single-Candidate Committees**County
Election Commission

1. DATE OF REPORT <u>1/25/2023</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Sheila Butt</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>8/4/2022</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>3870 Albert Matthews Rd. Columbia TN 38401</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>same</u>			
5. OFFICE SOUGHT (include district number, if applicable) <u>County Mayor</u>		6. NAME OF POLITICAL TREASURER (may be candidate)	
7. CATEGORY OR REPORT (Check one) ☐ FIRST QUARTER ☐ SECOND QUARTER ☐ THIRD QUARTER ☒ FOURTH QUARTER ☐ PRE-PRIMARY ☐ PRE-GENERAL ☐ MID-YEAR SUPPLEMENTAL ☐ YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>10/1/2022</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>1/15/2023</u>	
9. (Check one) a. ☐ This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. ☐ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.			
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. <u>Sheila K. Butt</u> <u>2/26/23</u> <u>Jan H</u> <u>1-26-23</u> signature of candidate date signature of political treasurer date			
11. WITNESS SIGNATURE <u>Debby Brown</u> <u>1-26-2023</u> <u>Debby Brown</u> <u>1-26-2023</u> signature of witness date signature of witness date			
12. SUMMARY a. BALANCE ON HAND LAST REPORT \$ <u>3,436.⁹⁰</u> b. TOTAL RECEIPTS THIS PERIOD \$ <u>1,856.-</u> c. TOTAL DISBURSEMENTS THIS PERIOD \$ <u>4,556.-</u> d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ <u>730.⁹⁰</u> e. TOTAL LOANS OUTSTANDING \$ <u>22,200</u> f. TOTAL OBLIGATIONS OUTSTANDING \$ <u>0</u>			



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Sheila Butt	14. REPORT COVERING THE PERIOD FROM: <u>10/1/2022</u> TO: <u>1/15/2023</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 50.-

b. Itemized Contributions (over \$100 from each source this period) \$ 1800.-

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 1,850.-

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 1,850.-

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

	\$	<u>0</u>
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Total of Expenditures (\$100 or less each payee) \$ 0

b. Itemized Expenditures (Over \$100 each payee this period) \$ 1,780.-

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 1,780.-

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 2,800.-

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 4,580.-

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ /

b. Itemized in-kind contributions (over \$100 from each source this period) \$ /

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ /

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ /

b. Itemized Obligations Outstanding (Over \$100 each) \$ /

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ /



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Sheila Butt</i>				2. REPORT COVERING THE PERIOD FROM: <i>10/1/2022</i> TO: <i>1/15/2023</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Joyce</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Wilkinson</i>				☐ Primary Election ☒ General Election	
Address <i>1415 Cliff White Rd.</i>				☐ Runoff (Local Elections Only)	
City <i>Columbia</i>	State <i>TN</i>	Zip Code <i>38401</i>	Date of Contribution <i>10/20/22</i>		Amount of Contribution <i>300.00</i>
Occupation <i>Retired</i>					Aggregate This Election <i>300.-</i>
Employer <i>Retired</i>					
First Name <i>Stephanie</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Allred</i>				☐ Primary Election ☒ General Election	
Address <i>2895 Pullens Mill Rd.</i>				☐ Runoff (Local Elections Only)	
City <i>Columbia</i>	State <i>TN</i>	Zip Code <i>38401</i>	Date of Contribution <i>10/21/22</i>		Amount of Contribution <i>250.-</i>
Occupation <i>Retired</i>					Aggregate This Election <i>250.-</i>
Employer <i>Retired</i>					
First Name <i>Jodel</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Ailshire</i>				☐ Primary Election ☒ General Election	
Address <i>4013 Shenandoah Dr</i>				☐ Runoff (Local Elections Only)	
City <i>Columbia</i>	State <i>TN</i>	Zip Code <i>38401</i>	Date of Contribution <i>10/21/22</i>		Amount of Contribution <i>250.-</i>
Occupation <i>Retired</i>					Aggregate This Election <i>250.-</i>
Employer <i>Retired</i>					
First Name <i>Michael</i>		Middle Name <i>R.</i>		Contribution Received For:	
Last Name/Organization Name <i>Floyd</i>				☐ Primary Election ☒ General Election	
Address <i>202 Mr. Cayer Lane</i>				☐ Runoff (Local Elections Only)	
City <i>Columbia</i>	State <i>TN</i>	Zip Code <i>38401</i>	Date of Contribution <i>10/21/22</i>		Amount of Contribution <i>500.-</i>
Occupation <i>Contractor</i>					Aggregate This Election <i>500.-</i>
Employer <i>Self Employed</i>					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					<i>1,300.-</i>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Shelia Butth</i>				2. REPORT COVERING THE PERIOD FROM: <i>10/1/22</i> TO: <i>1/15/23</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>1,300.-</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Charles</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Tisher</i>				☐ Primary Election ☒ General Election	
Address <i>P.O. Box 125</i>				☐ Runoff (Local Elections Only)	
City <i>Columbia</i>	State <i>TN</i>	Zip Code <i>38402</i>	Date of Contribution <i>10/21/22</i>		Amount of Contribution <i>250.-</i>
Occupation <i>Retired</i>					Aggregate This Election <i>250.-</i>
Employer <i>Retired</i>					
First Name <i>James</i>		Middle Name <i>Glenn</i>		Contribution Received For:	
Last Name/Organization Name <i>Dugger, Jr</i>				☐ Primary Election ☒ General Election	
Address <i>700 Rutherford Lane</i>				☐ Runoff (Local Elections Only)	
City <i>Columbia</i>	State <i>TN</i>	Zip Code <i>38401</i>	Date of Contribution <i>10/21/22</i>		Amount of Contribution <i>250.-</i>
Occupation <i>Realtor</i>					Aggregate This Election <i>250.-</i>
Employer <i>Crye Leike</i>					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election	
Address				☐ Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				☐ Primary Election ☐ General Election	
Address				☐ Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution		Amount of Contribution
Occupation					Aggregate This Election
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					<i>1,800.-</i>



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Sheila Butt</i>		2. REPORT COVERING THE PERIOD FROM: <i>10/1/22</i> TO: <i>11/15/23</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount <i>0</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name <i>r</i>	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Columbia News</i>		<i>Billboards</i>	<i>1,750.-</i>
Address <i>102 Nashville Hwy</i>			
City <i>Columbia</i>	State <i>TN</i> Zip Code <i>38401</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			<i>1,750.-</i>



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Sheila Butt				2. REPORT COVERING THE PERIOD FROM: 10/1/22 TO: 1/15/23			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name Sheila		Middle Name		Outstanding Loan Balance (Beginning of Period) 3,000		Loans Received	
Last Name/Organization Name Butt				Loan Payments 2,800		Outstanding Loan Balance (End of Period) 200	
Address 3870 Albert Matthews Rd.				Loan Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)		Date of Loan 5/27/22	
City Columbia		State IN		Zip Code 38401			
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)							
First Name				Middle Name			
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name				Middle Name			
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name				Middle Name			
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name				Middle Name			
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name				Middle Name			
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name				Middle Name			
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			

4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16, on summary page.) (Total loan payments should also be shown in item 20, on summary page.) (Total outstanding loan balance should also be shown in item 12.e, on front page.)				Outstanding Loan Balance (Beginning of Period) 25,000		Loans Received		Loan Payments 2,800		Outstanding Loan Balance (End of Period) 22,200	
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