CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

PHOTOCOPY CANNOT BE ACCEPTED TCA 2-5-102

1. DATE OF REPORT: July 1, 2022	2.a. NAME OF CANDIDATE OR COMMITTEE: Jasmine Boyd
2.b. IF COMMITTEE, NAME OF CANDIDATE: Jasmine Boyd	3. ELECTION DATE: August 4, 2022

4.a. CAMPAIGN ADDRESS AND PHONE

Street or Rural Route	City	State	Zip Code	Phone
1199 N. Pkwy Apt 101	Mem.	TN	38105	678-472-1160

4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)

Street or Rural Route	City	State	Zip Code	Phone

5. OFFICE SOUGHT (include district number, if applicable): State Exec Committeeperson	6. NAME OF POLITICAL TREASURER (may be candidate): Dem

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: April 21, 2022	8.b. ENDING DATE OF REPORTING PERIOD: June 30, 2022

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.

signature of candidate	date	signature of political treasurer	date
		[signature]	7/11/22

11. WITNESS SIGNATURE

signature of witness	date	signature of witness	date
[signature]	7/11/22	[signature]	7/11/22

12. SUMMARY

a.	BALANCE ON HAND LAST REPORT	$
b.	TOTAL RECEIPTS THIS PERIOD	$ 9819.17
c.	TOTAL DISBURSEMENTS THIS PERIOD	$ 0
d.	BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	$ 9819.17
e.	TOTAL LOANS OUTSTANDING	$ 0
f.	TOTAL OBLIGATIONS OUTSTANDING	$ 0

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
Friends of Jasmine Boyd	FROM: 4.24.22 TO: 6.30.22

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 3314.68

b. Itemized Contributions (over $100 from each source this period) ..... $ 6504.49

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... $ 9819.17

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.) ..... $ 9819

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)

_____ $ 0

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

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

b. Itemized Expenditures (Over $100 each payee this period) ..... $ _____

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... $ 0

20. LOAN REPAYMENTS MADE THIS PERIOD ..... $ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) ..... $ 0

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions ($100 or less from each source this period) ..... $ 0

b. Itemized in-kind contributions (over $100 from each source this period) ..... $ 0

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

23. OBLIGATIONS

a. Unitemized Obligations Outstanding ($100 or less each) ..... $ 0

b. Itemized Obligations Outstanding (Over $100 each) ..... $ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) ..... $ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: Friends of Jasmine Boyd

2. REPORT COVERING THE PERIOD — FROM: — TO:

3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter $0 if first itemized page): Amount $ 0

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than $100 from any contributor)

First Name	Middle Name	Last Name/Organization Name	Address	City	State	Zip Code	Occupation	Employer	Contribution Received For	Amount of Contribution	Date of Contribution	Aggregate This Election
Coleman	N.	Wilson	1199 North Parkway	Memphis	TN	38105	real estate	self employed	☑ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	$1400.00	4.19.22	
Glenn		Reesee	361 Hackle Road LN	Bristol	TN	37620	Non profit Development	St. Jude Childrens Research Hospital	☑ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	$250.00	4.19.22	
Alicia		Mathews	766 Sunshine Ave.	Memphis	TN	38109	Non profit Development	St. Jude Childrens Research Hospital	☑ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	$194.62	4.19.22	
Emmanuel		Spence	420 South Front Unit 101	Memphis	TN	38103	Non profit Development	St. Jude Childrens Research Hospital	☑ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	$170.90	4.20.22	

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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: Friends of Jasmine Boyd

2. REPORT COVERING THE PERIOD — FROM: — TO:

3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter $0 if first itemized page) — Amount: $1135.30

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than $100 from any contributor)

First Name	Middle Name	Last Name/Organization Name	Address	City	State	Zip Code	Occupation	Employer	Contribution Received For	Date of Contribution	Amount of Contribution	Aggregate This Election
LeDeidre		Turner	10316 S. Peoria	Chicago	IL	60643			☑ Primary ☐ General ☐ Runoff	4.20.22	$250.00	
Diamond		Taylor					entrepreneur	self employed	☑ Primary ☐ General ☐ Runoff	4.19.22	$245.15	
Bar		Vegan					business	self employed	☑ Primary ☐ General ☐ Runoff	5.11.22	$242.28	
Jasmine		Wilson	1199 North Pkwy	Memphis	TN	38105	Non profit development	St. Jude Children's Research Hospital	☑ Primary ☐ General ☐ Runoff	4.19.22	$200.00	

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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: Friends of Jasmine Boyd

2. REPORT COVERING THE PERIOD FROM: TO:

3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter $0 if first itemized page): Amount $1965.52

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than $100 from any contributor)

First Name	Middle Name	Last Name/Organization Name	Address	City	State	Zip Code	Occupation	Employer	Contribution Received For	Amount of Contribution	Date of Contribution	Aggregate This Election
Kiersten		Hawes	665 S. Riverside Drive	Memphis	TN	38103	Coal Worker	LeBonheur Childrens Hospital	☑ Primary ☐ General ☐ Runoff	$147.05	4.19.22	
Dan		Gilman	45 Park Ave	New York	NY	10016	business	self-employed	☑ Primary ☐ General ☐ Runoff	$387.95	5.11.22	
Dave		Cameron							☑ Primary ☐ General ☐ Runoff	$387.05 $110.00	4.19.22	
Jimmie		Strong							☑ Primary ☐ General ☐ Runoff	$490.30	4.19.22	

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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: Friends of Jasmine Boyd

2. REPORT COVERING THE PERIOD — FROM: — TO:

3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter $0 if first itemized page) — Amount: $937.43

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than $100 from any contributor)

First Name	Middle Name	Last Name/Organization Name	Address	City	State	Zip Code	Occupation	Employer	Contribution Received For	Date of Contribution	Amount of Contribution	Aggregate This Election
Derrick		Parker	6101 Georgetown mill Dr	Brandywine	MD	20613	Armed Service	U.S. Navy	☑ Primary ☐ General ☐ Runoff	4.19.22	$250.00	
Carl		Persin	9871 Randle Valley Dr.	Cordova	TN	38018	Business	United Postal Service	☑ Primary ☐ General ☐ Runoff	4.20.22	$150.00	
Tammy		Parker	2999 Battlement Circle	Loganville	GA	30052	teacher		☑ Primary ☐ General ☐ Runoff	4.19.22	$93.75	
John		Freeman	1262 Island Place E	Memphis	TN	38103			☑ Primary ☐ General ☐ Runoff	5.11.22	$485.06	

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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: Friends of Jasmine Boyd

2. REPORT COVERING THE PERIOD — FROM: — TO:

3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter $0 if first itemized page) — Amount: $1,105.79

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than $100 from any contributor)

First Name	Middle Name	Last Name/Organization Name	Address	City	State	Zip Code	Occupation	Employer	Contribution Received For:	Amount of Contribution	Date of Contribution	Aggregate This Election
Robert		Spence	145 Forrest Ave	Memphis	TN	38112	Law	Self employed	☑ Primary ☐ General ☐ Runoff	$300.00	6.13.22	
Jeremiah		Burton	155 Lenistarmay Circle	Oakland	TN	38060	Non profit development	American Red Cross	☑ Primary ☐ General ☐ Runoff	$300.00	6.21.22	
Tamika		Mallory	1079 Lydig Avenue	Bronx	NY	10461	Politician	Self employed	☑ Primary ☐ General ☐ Runoff	$242.38	6.17.22	
Angela		Irvin	6296 Bending River Rd	Bartlett	TN	38135			☑ Primary ☐ General ☐ Runoff	$145.71	6.24.22	

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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: Friends of Jasmine Boyd

2. REPORT COVERING THE PERIOD — FROM: — TO:

3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter $0 if first itemized page) — Amount: $987.45

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than $100 from any contributor)

First Name	Middle Name	Contribution Received For:	Amount of Contribution
Joe		☑ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	$150.00
Last Name/Organization Name: Townes			
Address: 4528 Saint Honore Pr			
City: Memphis	State: TN	Zip Code: 38116	Date of Contribution: 6.24.22
Occupation: Politician			Aggregate This Election
Employer: Self employed			

First Name	Middle Name	Contribution Received For:	Amount of Contribution
Mitara		☑ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	$250.00
Last Name/Organization Name: Dunn			
Address: 2036 Holtz Ln			
City: Atlanta	State: GA	Zip Code: 30318	Date of Contribution: 4.24.22
Occupation			Aggregate This Election
Employer			

First Name	Middle Name	Contribution Received For:	Amount of Contribution
		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Last Name/Organization Name			
Address			
City	State	Zip Code	Date of Contribution
Occupation			Aggregate This Election
Employer			

First Name	Middle Name	Contribution Received For:	Amount of Contribution
		☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	
Last Name/Organization Name			
Address			
City	State	Zip Code	Date 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.)

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE: Friends of Jasmine Bud			2. REPORT COVERING THE PERIOD FROM: 4.24.22 TO: 6.30.22		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than $100 owed to any person/vendor at the end of the reporting period)	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation	$0	$0	$0	$0	
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation					
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation					
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation					
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation					
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)	$0	$0	$0	$0	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD	
N/A	FROM:	TO:

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	Middle Name	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
Last Name/Organization Name					
Address		Loan Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		Date of Loan	
City	State	Zip Code			

List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)

First Name	Middle Name		First Name	Middle Name	
Last Name/Organization Name			Last Name/Organization Name		
Address			Address		
City	State	Zip Code	City	State	Zip Code
Amount Guaranteed Outstanding			Amount Guaranteed Outstanding		
First Name	Middle Name		First Name	Middle Name	
Last Name/Organization Name			Last Name/Organization Name		
Address			Address		
City	State	Zip Code	City	State	Zip Code
Amount Guaranteed Outstanding			Amount Guaranteed Outstanding		
First Name	Middle Name		First Name	Middle Name	
Last Name/Organization Name			Last Name/Organization Name		
Address			Address		
City	State	Zip Code	City	State	Zip Code
Amount Guaranteed Outstanding			Amount Guaranteed Outstanding		
First Name	Middle Name		First Name	Middle Name	
Last Name/Organization Name			Last Name/Organization Name		
Address			Address		
City	State	Zip Code	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)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD FROM: TO:		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than $100 owed to any person/vendor at the end of the reporting period)	Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation					
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation					
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation					
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation					
First Name / Middle Name Last Name/Business Name Address City / State / Zip Code Description of Obligation					
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)					

N/A

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD FROM:	TO:
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter $0 if first itemized page)		Amount

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than $100 to any payee during the period)

Payee	Purpose of Expenditure	Amount of Expenditure
First Name / Middle Name / Last Name/Business Name / Address / City / State / Zip Code		
First Name / Middle Name / Last Name/Business Name / Address / City / State / Zip Code		
First Name / Middle Name / Last Name/Business Name / Address / City / State / Zip Code		
First Name / Middle Name / Last Name/Business Name / Address / City / State / Zip Code		
First Name / Middle Name / Last Name/Business Name / Address / City / State / Zip Code		
First Name / Middle Name / 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.)