



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/10/2023 2.a. Candidate or Committee Name: Ford Canale
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 10/5/2023
4. Campaign Address: 1661 Aaron Brenner Dr Ste 300
City: Memphis State: TN Zip Code: 38120 Phone: (901) 761-2720
5. Candidate Home Address: 418 Greenfield Rd
City: Memphis State: TN Zip Code: 38117 Phone: (901) 412-7732
Candidate Email Address: ford@canalefuneraldirectors.com
6. Office Sought: (include district number, if applicable) Memphis City Council, Dist. 9, Pos. 2
7. Name of Political Treasurer (may be candidate): Jack Sammons
Political Treasurer Email Address: jack@amprogelc.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
9. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023
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.

Candidate Signature _____ Date _____ Political Treasurer Signature _____ Date _____
Witness Signature _____ Date _____ Witness Signature _____ Date _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$71,104.62</u>
b. Total Receipts This Period	\$ <u>\$21,050.00</u>
c. Total Disbursements This Period	\$ <u>\$1,350.61</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$90,804.01</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Ford Canale

14. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(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) \$ \$21,050.00
- c. Loans Received This Reporting Period..... \$ _____
- d. Interest Received This Reporting Period \$ _____
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$21,050.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$1,350.61
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$1,350.61

17. In-Kind Contributions:

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

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Ford Canale
2. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: J Middle Name: Bayard Last Name: Boyle Jr.
Address: PO Box 17800 City: Memphis State: TN Zip Code: 38187
Occupation: Co-Chairman Employer: Boyle Investment Co
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,600.00 Date of Contribution: 5/24/2023 Aggregate This Election: \$ \$1,600.00

Business or Organization Name: _____ **OR**
First Name: Cheryl Middle Name: M. Last Name: Canale
Address: 3426 Kel Creek Cv City: Memphis State: TN Zip Code: 38122
Occupation: Homemaker Employer: None
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,800.00 Date of Contribution: 4/28/2023 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: _____ **OR**
First Name: Warren Middle Name: S. Last Name: Canale
Address: 3426 Creek Cv City: Memphis State: TN Zip Code: 38122
Occupation: Owner Employer: Canale Funeral Directors
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,800.00 Date of Contribution: 4/28/2023 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: _____ **OR**
First Name: Pace Middle Name: _____ Last Name: Cooper
Address: 1661 Aaron Brenner Dr Ste 200 City: Memphis State: TN Zip Code: 38120
Occupation: Cooper Companies Employer: President
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 4/28/2023 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$5,350.00

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Ford Canale
2. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,350.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: M-PAC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 638 Jefferson Ave City: Memphis State: TN Zip Code: 38105
Occupation: _____ Employer: _____
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$2,500.0 Date of Contribution: 5/24/2023 Aggregate This Election: \$ \$2,500.0

Business or Organization Name: _____ **OR**
First Name: Henry Middle Name: _____ Last Name: Morgan
Address: PO Box 17800 City: Memphis State: TN Zip Code: 38187
Occupation: Boyle Investment Company Employer: Exec VP
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,600.0 Date of Contribution: 4/28/2023 Aggregate This Election: \$ \$1,600.0

Business or Organization Name: _____ **OR**
First Name: Paul Middle Name: _____ Last Name: Boyle
Address: 5900 Poplar Ave Ste 100 City: Memphis State: TN Zip Code: 38119
Occupation: President Employer: Boyle Investment Co
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,600.0 Date of Contribution: 6/23/2023 Aggregate This Election: \$ \$1,600.0

Business or Organization Name: _____ **OR**
First Name: Mark Middle Name: J. Last Name: Halperin
Address: 1370 W Massey Rd City: Memphis State: TN Zip Code: 38120
Occupation: Executive VP Employer: Boyle Investment Co
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,600.0 Date of Contribution: 6/23/2023 Aggregate This Election: \$ \$1,600.0

Total Contributions: \$ \$12,650.00

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Ford Canale
2. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$12,650.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Matthew Middle Name: _____ Last Name: Hayden
Address: 6425 S Oak Shadows Cir City: Memphis State: TN Zip Code: 38119
Occupation: CFO Employer: Boyle Investment Co
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,600.0 Date of Contribution: 6/23/2023 Aggregate This Election: \$ \$1,600.0

Business or Organization Name: _____ **OR**
First Name: Henry Middle Name: W. Last Name: Morgan Jr.
Address: 5900 Poplar Ste 100 City: Memphis State: TN Zip Code: 38119
Occupation: Real Estate Employer: Boyle Investment Co
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,600.0 Date of Contribution: 6/23/2023 Aggregate This Election: \$ \$1,600.0

Business or Organization Name: _____ **OR**
First Name: Bayard Middle Name: B. Last Name: Morgan
Address: 7491 McVay Rd City: Germantown State: TN Zip Code: 38138
Occupation: Executive Employer: Boyle Investment Co
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,600.0 Date of Contribution: 6/23/2023 Aggregate This Election: \$ \$1,600.0

Business or Organization Name: _____ **OR**
First Name: Cathy Middle Name: _____ Last Name: Weiss
Address: 230 Cloister Green Ln City: Memphis State: TN Zip Code: 38120
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,800.0 Date of Contribution: 6/23/2023 Aggregate This Election: \$ \$1,800.0

Total Contributions: \$ \$19,250.00

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Ford Canale
2. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$19,250.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Craig Middle Name: _____ Last Name: Weiss

Address: 230 Cloister Green Ln City: Memphis State: TN Zip Code: 38120

Occupation: Executive VP Employer: Tower Ventures

Contribution Received For: Primary Election ☒ General Election ☐ Runoff (Local Elections Only) ☐

Amount of Contribution: \$ \$1,800.0 Date of Contribution: 6/23/2023 Aggregate This Election: \$ \$1,800.0

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) ☐

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) ☐

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) ☐

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ \$21,050.00

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

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Ford Canale
2. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Watkins Uiberall PLLC **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Accounting

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 5/11/2023

Business or Organization Name: Princeton Avenue Baptist Church **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 468 Scott St City: Memphis State: TN Zip Code: 38112

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$120.00 Date of Expenditure: \$ 6/12/2023

Business or Organization Name: Garden District **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 5040 Sanderlin Ave #109 City: Memphis State: TN Zip Code: 38117

Purpose of Expenditure: Fundraiser Expenses

Amount of Expenditure: \$ \$290.84 Date of Expenditure: \$ 4/27/2023

Business or Organization Name: American Stationery **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 100 N Park Ave City: Peru State: IN Zip Code: 46970

Purpose of Expenditure: Fundraiser Expenses

Amount of Expenditure: \$ \$115.13 Date of Expenditure: \$ 4/27/2023

Business or Organization Name: Paperless Post **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 115 Broadway City: New York State: NY Zip Code: 10006

Purpose of Expenditure: Fundraiser Expenses

Amount of Expenditure: \$ \$63.66 Date of Expenditure: \$ 4/27/2023

Total Expenditures: \$ \$1,089.63

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

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Ford Canale
2. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,089.63

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Caissa Public Strategy **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5100 Poplar Ave Ste 1720 City: Memphis State: TN Zip Code: 38137
Purpose of Expenditure: Campaign Management
Amount of Expenditure: \$ \$260.98 Date of Expenditure: \$ 6/29/2023

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ \$1,350.61

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