# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates
## For Single-Candidate Committees

1. Date: 7/10/2026 2.a. Candidate or Committee Name: Cheryl D Mayes

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026

4. Campaign Address: 1632 Bridgecrest Drive

City: Antioch State: TN Zip Code: 37013 Phone: _____

5. Candidate Home Address: 1623 Bridgecrest Drive

City: Antioch State: TN Zip Code: 37013 Phone: _____

Candidate Email Address: mayes4district6@gmail.com

6. Office Sought: (include district number, if applicable) School Board District 6

7. Name of Political Treasurer (may be candidate): Cheryl Mayes

Political Treasurer Email Address: mayesfordistrict6@gmail.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: 4/26/2026 End Date: 6/30/2026

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 |

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07/10/26 - 9:39 AM

12. Summary:

| | | |
|---|---|---|
| a. | Balance On Hand Last Report | $ $3,525.77 |
| b. | Total Receipts This Period | $ $0.00 |
| c. | Total Disbursements This Period | $ $1,749.96 |
| d. | Balance On Hand (12.a. plus 12.b. minus 12.c.) | $ $1,775.81 |
| e. | Total Loans Outstanding | $ $0.00 |
| f. | Total Obligations Outstanding | $ $0.00 |

# SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Cheryl D Mayes

14. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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) ..... $ _____

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.) ..... $ _____

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $1,749.96
(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.)..... $ $1,749.96

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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Cheryl D Mayes

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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: Popeye's Chicken **OR**

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

Address: 5812 Murfreesboro Rd City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: lunch for volunteers

Amount of Expenditure: $ $19.76 Date of Expenditure: $ 4/27/2026

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Business or Organization Name: Mailchimp **OR**

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

Address: 405 N Angier Ave. NE City: Atlanta State: GA Zip Code: 30308

Purpose of Expenditure: online marketing platform

Amount of Expenditure: $ $14.27 Date of Expenditure: $ 5/4/2026

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Business or Organization Name: Women's Political Caucus of Middle Tennessee **OR**

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

Address: 8398 secure act blue acct City: nashville State: TN Zip Code: 37218

Purpose of Expenditure: Donation to support candidates running for office

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 5/4/2026

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Business or Organization Name: Kroger **OR**

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

Address: Bell Road City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Fuel

Amount of Expenditure: $ $52.12 Date of Expenditure: $ 5/4/2026

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Business or Organization Name: Wal-Mart **OR**

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

Address: 5411 Mt. View Rd. City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Supplies for campaign

Amount of Expenditure: $ $16.44 Date of Expenditure: $ 5/4/2026

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Total Expenditures: $ $202.59

(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: Cheryl D Mayes

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $202.59

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: USPS **OR**

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

Address: 9402 Donelson City: old hickory State: TN Zip Code: 37138

Purpose of Expenditure: postage

Amount of Expenditure: $ $10.92 Date of Expenditure: $ 5/5/2026

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Business or Organization Name: Prince's Hot Chicken **OR**

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

Address: 4060 Cane Ridge Pkwy #102 City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Election night - food for volunteers

Amount of Expenditure: $ $98.43 Date of Expenditure: $ 5/6/2026

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Business or Organization Name: Sams Club **OR**

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

Address: 5300 Antioch Pike City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Equipment for campaign - laptop

Amount of Expenditure: $ $602.53 Date of Expenditure: $ 5/18/2026

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Business or Organization Name: Wal-Mart **OR**

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

Address: 5411 Mt. View Rd. City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Supplies for campaign

Amount of Expenditure: $ $163.53 Date of Expenditure: $ 5/18/2026

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Business or Organization Name: Kroger **OR**

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

Address: Bell Road City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Fuel

Amount of Expenditure: $ $43.68 Date of Expenditure: $ 5/26/2026

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Total Expenditures: $ $1,121.68

(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: Cheryl D Mayes

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $1,121.68

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: Mailchimp **OR**

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

Address: 405 N Angier Ave. NE City: Atlanta State: GA Zip Code: 30308

Purpose of Expenditure: online marketing platform

Amount of Expenditure: $ $14.27 Date of Expenditure: $ 6/2/2026

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Business or Organization Name: Sonic **OR**

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

Address: 5814 Old Hickory Blvd City: Old Hickory State: TN Zip Code: 37138

Purpose of Expenditure: Lunch

Amount of Expenditure: $ $11.87 Date of Expenditure: $ 6/4/2026

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Business or Organization Name: Wal-Mart **OR**

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

Address: 5411 Mt. View Rd. City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Supplies for campaign

Amount of Expenditure: $ $80.03 Date of Expenditure: $ 6/8/2026

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Business or Organization Name: Kroger **OR**

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

Address: Bell Road City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Fuel

Amount of Expenditure: $ $45.17 Date of Expenditure: $ 6/8/2026

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Business or Organization Name: Amerigo **OR**

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

Address: West End ave City: nashville State: TN Zip Code: 37203

Purpose of Expenditure: Food for volunteer

Amount of Expenditure: $ $51.58 Date of Expenditure: $ 6/8/2026

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Total Expenditures: $ $1,324.60

(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: Cheryl D Mayes

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $1,324.60

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: Davidson County Democratic Women **OR**

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

Address: P.O. Box 330154 City: Nashville State: TN Zip Code: 37203

Purpose of Expenditure: Donation to support candidates running for office - annual picnic

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 6/22/2026

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Business or Organization Name: ChatGPT **OR**

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

Address: 1455 3rd Street City: San Francisco State: CA Zip Code: 94158

Purpose of Expenditure: online marketing platform

Amount of Expenditure: $ $21.95 Date of Expenditure: $ 6/22/2026

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Business or Organization Name: Whataburger **OR**

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

Address: 5814 Dickerson Pike City: madison State: TN Zip Code: 37115

Purpose of Expenditure: Lunch

Amount of Expenditure: $ $12.28 Date of Expenditure: $ 6/26/2026

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Business or Organization Name: _____ **OR**

First Name: Cheryl Middle Name: _____ Last Name: Kroger

Address: Bell Road City: Antioch State: TN Zip Code: 37013

Purpose of Expenditure: Fuel

Amount of Expenditure: $ $17.50 Date of Expenditure: $ 6/29/2026

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Business or Organization Name: Enterprise Car Rental **OR**

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

Address: 515 Donelson Pike City: Nashville State: TN Zip Code: 37214

Purpose of Expenditure: Car rental to drive to GA Dems Boot Camp training

Amount of Expenditure: $ $527.75 Date of Expenditure: $ 6/29/2026

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Total Expenditures: $ $2,004.08

(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: Cheryl D Mayes

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $2,004.08

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: Chevron **OR**

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

Address: 2195 Monroe Dr NE City: atlanta State: GA Zip Code: 30324

Purpose of Expenditure: Fuel

Amount of Expenditure: $ $20.00 Date of Expenditure: $ 6/29/2026

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Business or Organization Name: Buc-Ees **OR**

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

Address: 601 Union Grove Rd SE City: Calhoun State: GA Zip Code: 30701

Purpose of Expenditure: Fuel

Amount of Expenditure: $ $25.88 Date of Expenditure: $ 6/30/2026

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Business or Organization Name: Enterprise Car Rental **OR**

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

Address: 515 Donelson Pike City: Nashvillee State: TN Zip Code: 37214

Purpose of Expenditure: Refund for car rental

Amount of Expenditure: $ ($300.00) Date of Expenditure: $ 6/30/2026

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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: $ _____

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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: $ _____

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Total Expenditures: $ $1,749.96

(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.)