

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 10/10/2022		2.a. NAME OF CANDIDATE OR COMMITTEE Cheryl D. Mayes	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE 2022-08-04	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route PO Box 1067		City Antioch	State TN
		Zip Code 37011-1067	Phone
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) School Board District 6		6. NAME OF POLITICAL TREASURER (may be candidate) Jemice Cheatham	
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 2022-07-26		8.b. ENDING DATE OF REPORTING PERIOD 2022-09-30	
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		_____ signature of political treasurer	
_____ date		_____ date	
11. WITNESS SIGNATURE			
_____ signature of witness		_____ signature of witness	
_____ date		_____ date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$3,289.00	
b. TOTAL RECEIPTS THIS PERIOD		\$1,300.00	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$1,965.99	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$2,623.01	
e. TOTAL LOANS OUTSTANDING		\$0.00	
f. TOTAL OBLIGATIONS OUTSTANDING		\$0.00	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Cheryl D. Mayes	14. REPORT COVERING THE PERIOD FROM: 2022-07-26 TO: 2022-09-30	
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

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

b. Itemized Contributions (over \$100 from each source this period) \$ 1,300.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 1,300.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ _____

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ _____

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 1,300.00

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)

	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

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

b. Itemized Expenditures (Over \$100 each payee this period) \$ 1,965.99

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 1,965.99

20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 1,965.99

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 Cheryl D. Mayes				2. REPORT COVERING THE PERIOD FROM: 2022-07-26 TO: 2022-09-30		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$0.00	
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
Last Name/Organization Name		freddie@readyforfreddie.com		☐ Primary Election ☒ General Election		\$250.00
Address		P.O. Box 331812		☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Nashville		TN	37203	2022-07-30		\$250.00
Occupation		Architect				
Employer		HealthStream				
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Bedne		☐ Primary Election ☒ General Election		\$50.00
Address		Metro Govt		☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Nashville		TN	37203	2022-07-27		\$50.00
Occupation		Manager				
Employer		Metro Govt				
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name		MNEA/PACE Teacher's Association		☐ Primary Election ☒ General Election		\$1,000.00
Address		531 Fairgrounds CT		☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Nashville		TN	37211	2022-08-01		\$3,000.00
Occupation		PAC				
Employer		MNEA				
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				☐ Primary Election ☐ General Election		
Address				☐ Runoff (Local Elections Only)		
City		State	Zip Code	Date of Contribution		Aggregate This Election
Occupation						
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.)					\$1,300.00	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Cheryl D. Mayes			2. REPORT COVERING THE PERIOD FROM: 2022-07-2 TO: 2022-09-30		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name Christie		Middle Name Small		Purpose of Expenditure Primary Election Night Watch Party Catering	Amount of Expenditure \$585.00
Last Name/Business Name Christie's Food Like No Other Catering Service					
Address 814 Saxony Lake					
City Antioch	State TN	Zip Code 37013			
First Name		Middle Name		Purpose of Expenditure Campaign Direct Mail	Amount of Expenditure \$12.02
Last Name/Business Name Mailchimp c/o The Rocket Science Group, LLC					
Address 675 Ponce De Leon Ave NE Suite 5000					
City Atlanta	State GA	Zip Code 30308			
First Name		Middle Name		Purpose of Expenditure DJ for Watch Night Party	Amount of Expenditure \$300.00
Last Name/Business Name Victor Chatman Productions					
Address victorchatmanstudios@gmail.com					
City Antioch	State TN	Zip Code 37013			
First Name		Middle Name		Purpose of Expenditure Donation for education program	Amount of Expenditure \$100.00
Last Name/Business Name NAACP Nashville Branch					
Address 1308 Jefferson St,					
City nashville	State TN	Zip Code 37208			
First Name Christie		Middle Name Small		Purpose of Expenditure General Election Night Watch Party Catering	Amount of Expenditure \$470.00
Last Name/Business Name Christie's Food Like No Other Catering Service					
Address 814 Saxony Lake					
City Antioch	State TN	Zip Code 37013			
First Name		Middle Name		Purpose of Expenditure Campaign Direct Mail	Amount of Expenditure \$12.02
Last Name/Business Name Mailchimp c/o The Rocket Science Group, LLC					
Address 675 Ponce De Leon Ave NE Suite 5000					
City Atlanta	State GA	Zip Code 30308			
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.)					\$1,479.04



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Cheryl D. Mayes			2. REPORT COVERING THE PERIOD FROM: 2022-07-2 TO: 2022-09-30	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$1,479.04
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Mayes 4 District 6 Campaign		Food for volunteers	\$101.41	
Address PO Box 1067				
City Antioch	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Thornton's		Gas	\$45.50	
Address Bell Road				
City Antich	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Various Retailers		Supplies for campaign	\$22.17	
Address Bell Road				
City Antioch	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name The Branch Nashville		Donation for food bank	\$51.80	
Address 41 Tusculum Rd				
City Antioch	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name USPS		Postage	\$24.00	
Address 5424 Bell Forge Ln E				
City Antioch	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Regions		Bank Fees	\$24.00	
Address Hickory Hollow				
City Antioch	State TN			
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.)				\$1,747.92



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Cheryl D. Mayes			2. REPORT COVERING THE PERIOD FROM: 2022-07-2 TO: 2022-09-30	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$1,747.92
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Frugal MacDooqal		Spirits for Election Night Watch party		\$218.07
Address 701 Division St				
City Nashville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State			
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.)				\$1,965.99

