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CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

Amend

1. Date: 7/9/2023 2.a. Candidate or Committee Name: Yolanda Cooper - Sutton
2.b. If Committee, Name of Candidate: _____ 3. Election Date: 10/5/2023
4. Campaign Address: 4072 SHIRLEY DR
City: Memphis State: TN Zip Code: 38109 Phone: (901) 396-6711
5. Candidate Home Address: _____
City: _____ State: _____ Zip Code: _____ Phone: _____
Candidate Email Address: _____
6. Office Sought: (include district number, if applicable) Memphis City Council, Dist. 8, Pos. 3
7. Name of Political Treasurer (may be candidate): Theresa Hence-Parks
Political Treasurer Email Address: tiger_mom05@yahoo.com

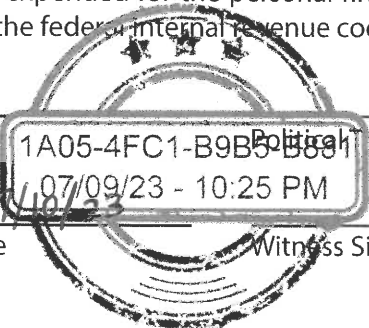
8. Category or Report: (check one)
 First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 Mid-Year Supplemental Year-End Supplemental

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.

Yolanda Cooper - Sutton _____ 7-10-2023
Candidate Signature Date 1A05-4FC1-B9B5-B881 Treasurer Signature Date
Julie E Upchurch _____
Witness Signature Date _____ Witness Signature Date



12. Summary:

a. Balance On Hand Last Report	\$ <u>\$0.00</u>
b. Total Receipts This Period	\$ <u>\$10,850.00</u>
c. Total Disbursements This Period	\$ <u>\$8,170.48</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$2,679.52</u>
e. Total Loans Outstanding	\$ <u>\$10,000.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

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13. Name of Candidate or Committee: Yolanda Sutton

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) \$ **\$850.00**
- c. Loans Received This Reporting Period..... \$ **\$10,000.00**
- 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.) \$ **\$10,850.00**

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ **\$8,170.48**
(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.)..... \$ **\$8,170.48**

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: Yolanda Sutton
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

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COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Angel Middle Name: _____ Last Name: Hall
Address: 1111 Woodberry Falls Court City: Nashville State: TN Zip Code: 37221
Occupation: Dentist Employer: Rivergate Village Dental
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 7/7/2023 Aggregate This Election: \$ \$0.00

Business or Organization Name: _____ **OR**
First Name: Kedzie Middle Name: _____ Last Name: White
Address: 1713 W. Holmes Road City: Memphis State: TN Zip Code: 39109
Occupation: Police Officer Employer: Memphis PD
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/7/2023 Aggregate This Election: \$ \$0.00

Business or Organization Name: _____ **OR**
First Name: Sharon Middle Name: _____ Last Name: Jackson
Address: 8883 Lake Edge Cove E City: Cordova State: TN Zip Code: 39016
Occupation: Executive Employer: COGIC
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/7/2023 Aggregate This Election: \$ \$0.00

Business or Organization Name: _____ **OR**
First Name: Farhad Middle Name: _____ Last Name: Modarai
Address: 601 Lees Lane City: Collingswood State: NJ Zip Code: 38101
Occupation: Doctor Employer: STRIVE
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/7/2023 Aggregate This Election: \$ \$0.00

Total Contributions: \$ \$400.00

(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: Yolanda Sutton
2. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023 ORIGINAL DOCUMENT
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$400.00 PHOTOCOPY CANNOT BE
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COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Jerry Middle Name: _____ Last Name: Harris - Jerry Harris
Address: 8645 Eagle View Dr City: Cordova State: TN Zip Code: 38018
Occupation: Creative Guru Employer: Jerry Harris Creative GurH
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 6/8/2023 Aggregate This Election: \$ \$0.00

Business or Organization Name: _____ OR
First Name: Monoteus Middle Name: _____ Last Name: Brown
Address: 454 Pimlico Dr 208 City: Cordova State: TN Zip Code: 38018
Occupation: Electrician Employer: MILGW
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/8/2023 Aggregate This Election: \$ \$0.00

Business or Organization Name: _____ OR
First Name: Hattie Middle Name: _____ Last Name: Nelson
Address: 637 Samuels Ave 4019 City: Fort Worth State: TX Zip Code: 76102
Occupation: Nurse Pactician Employer: Self Employes
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/16/2023 Aggregate This Election: \$ \$0.00

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: \$ \$850.00

(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: Yolanda Sutton

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

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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: _____ **OR**

First Name: Jerry Middle Name: _____ Last Name: Harris Creative Guru

Address: 1138 N. Germantown Pkwy, Suite City: Cordova State: TN Zip Code: 38016

Purpose of Expenditure: Web Design - Down Pymt

Amount of Expenditure: \$ \$2,771.00 Date of Expenditure: \$ 5/25/2023

Business or Organization Name: Cooper's Printing **OR**

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

Address: 1065 Goodman Road City: Horn Lake State: MS Zip Code: 38637

Purpose of Expenditure: Printing of Signs, Stakes, T-Shirts

Amount of Expenditure: \$ \$812.50 Date of Expenditure: \$ 5/26/2023

Business or Organization Name: United State Postal Service **OR**

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

Address: 1292 Gateway Cir City: Memphis State: TN Zip Code: 38116-999

Purpose of Expenditure: Post Office Box for Campaign

Amount of Expenditure: \$ \$113.00 Date of Expenditure: \$ 5/30/2023

Business or Organization Name: Sidney Chism's Annual Picnic **OR**

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

Address: 3657 Horn Lake Road City: Memphis State: TN Zip Code: 38109

Purpose of Expenditure: Campaign Rally

Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 5/30/2023

Business or Organization Name: Jerry Harris Creative Guru **OR**

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

Address: 1138 N Germantown Pkwy, Suite City: Cordova State: TN Zip Code: 38016

Purpose of Expenditure: Web Design - Final pymt

Amount of Expenditure: \$ \$2,771.00 Date of Expenditure: \$ 6/8/2023

Total Expenditures: \$ \$6,717.50

(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: Yolanda Sutton

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) \$ \$6,717.50

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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: Cash Saver OR

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

Address: 4049 Elvis Presley Blvd City: Memphis State: TN Zip Code: 38116

Purpose of Expenditure: Biscuits for Rally

Amount of Expenditure: \$ \$3.38 Date of Expenditure: \$ 6/10/2023

Business or Organization Name: Dexter Nelson Photography OR

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

Address: 4375 Hwy 51 N City: Horn Lake State: MS Zip Code: 38637

Purpose of Expenditure: Photos for Campaign Rally

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 6/10/2023

Business or Organization Name: Cooper Printing OR

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

Address: 1065 Goodman Road City: Horn Lake State: MS Zip Code: 38637

Purpose of Expenditure: Signs and stakes

Amount of Expenditure: \$ \$722.25 Date of Expenditure: \$ 6/14/2023

Business or Organization Name: Cooper Printing OR

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

Address: 1065 Goodman Road City: Horn Lake State: MS Zip Code: 38637

Purpose of Expenditure: Banner, Signs & Stakes

Amount of Expenditure: \$ \$477.35 Date of Expenditure: \$ 6/14/2023

Business or Organization Name: Eric Nichols; Soullife Photography OR

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

Address: 1868 Grandview Ave City: Memphis State: TN Zip Code: 38114

Purpose of Expenditure: Head Shot for Signs, Poster, Website, & T-shirts

Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 5/15/2023

Total Expenditures: \$ \$8,170.48

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Yolanda Sutton
2. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

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Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**

First Name: Yolanda Middle Name: _____ Last Name: Cooper-Sutton

Address: 4072 Shirley Dr City: Memphis State: TN Zip Code: 38109

Outstanding Loan Balance (Beginning) \$ \$3,500.00

Loans Received \$ \$3,500.00

Loan Payments \$ \$0.00

Outstanding Loan (End)..... \$ \$3,500.00

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

Date of Loan: 5/25/2023

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ _____

Loans Received \$ _____

Loan Payments \$ _____

Outstanding Loan (End)..... \$ _____

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Yolanda Sutton
2. Reporting Period: Start Date: 4/1/2023 End Date: 6/30/2023
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100)

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Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**
First Name: Yoland Middle Name: _____ Last Name: Cooper-Sutton
Address: 4072 Shirley Drive City: Memphis State: TN Zip Code: 38109
Outstanding Loan Balance (Beginning) \$ \$6,500.00
Loans Received \$ \$6,500.00
Loan Payments \$ \$0.00
Outstanding Loan (End)..... \$ \$6,500.00
Loan Received For: Primary Election General Election Runoff (Local Elections Only)
Date of Loan: 6/8/2023

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ \$10,000.00
Loans Received \$ \$10,000.00
Loan Payments \$ \$0.00
Outstanding Loan (End)..... \$ \$10,000.00